

1. **Departmental Organization Plan/Objectives** _____

2. **Functions of Department & relation to other areas/departments** _____

3. **Department Safety/Fire/Disaster Plan:**

a. Basic Infection Control Policies/Procedures for Area/Department _____

5. **Policies** as they relate to department, including:

a. Department Volunteer Supervisor _____

b. **Reporting Absences to Supervisor & Volunteer office** _____

c. **Incident Reports** _____

d. Eating in Department Policy _____

e. Smoking rules _____

6. **Specific & volunteer office.** **Safety Services**

DEPARTMENTAL TOUR to include:

1. Entire Department and other building or hospital areas in which the Volunteer works or has close association. _____

2. Introduction to Administrator, Nurse Manager, and fellow employees _____

3. Location of Supplies _____

4. Location of Policy/Procedure Manuals and other related Reference Manuals used in area _____

SUPERVISOR (Print name)

SUPERVISOR SIGNATURE

VOLUNTEER (Print name)

VOLUNTEER SIGNATURE

DEPARTMENT

DATE