

PART II

Orientation for New Employee (ONE) Checklist

(to be completed by employing organization)

Employee Name: _____

Organization: _____

Position Title/Grade: _____

EOD: _____

1. Introduction of New Employee <ul style="list-style-type: none"> ▪ Mission and Structure of Organization ▪ Introduction of Coworkers ▪ Tour of Facility: Restroom, Break area, Smoking Area ▪ Meetings / Staff Calls ▪ ICE (Integrated Customer Evaluation) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2. Office Resources <ul style="list-style-type: none"> ▪ Office Keys and Office Equipment ▪ Office Supplies ▪ Copier and Fax Use 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3. Telephone, Email and Internet Use <ul style="list-style-type: none"> ▪ User Test; System Administrator, Phone Roster ▪ CAC; Passwords, Log-ins 	<input type="checkbox"/> <input type="checkbox"/>
4. Civilian Personnel Management <ul style="list-style-type: none"> ▪ Job Description/SF-50 ▪ Work Hours/Schedule/Breaks ▪ Probationary Period ▪ MyBiz (for all employees) ▪ MyWorkplace (for supervisors only) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5. Time and Attendance Reporting: <ul style="list-style-type: none"> ▪ Timekeeper / ATAAPS Registration ▪ Sick Leave/ Annual Leave / LWOP ▪ Overtime/Comp Time/Holidays 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
6. Training <ul style="list-style-type: none"> ▪ Employee Required Training <i>see ONE, Part I subject: Mandatory Training</i> ▪ Supervisor Required Training <i>POC: CPAC</i> ▪ IDP – Individual Development Plan <i>see ONE, Part I subject: IDP</i> ▪ CES – Civilian Education System <i>IMCOM Reg 350-1 and www.amsc.belvoir.amry.mil</i> ▪ Tapes <i>AR 690-400 see ONE, Part I subject: Tapes</i> 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
7. Safety Procedures <ul style="list-style-type: none"> ▪ Fire and other Emergency ▪ Procedures / First Aid ▪ VPP Employee Safety Orientation 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8. Emergency Data <ul style="list-style-type: none"> ▪ (print out MyBiz data sheet) 	<input type="checkbox"/>

Employee Signature/Date: _____

Supervisor Signature/Date: _____