

**Site Induction Test**

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| **Name:** |  | **Date of Test:** |  |
| **Employer:** |  | **Score:** |  |
| **Pass/Fail:** |  | **Date of Re-Test:** |  |

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| --- |
| 1. **In case of the fire alarm being raised, where must you go?**
 |
| 1. To your supervisor
 |  |  |
| 1. Site Office
 |  |  |
| 1. An open are
 |  |  |
| 1. Muster Point
 |  |  |
|  |  |  |
| 1. **What information must you have read before starting a work activity?**
 |
| 1. Your own method / risk assessment
 |  |  |
| 1. Project Health and Safety Plan
 |  |  |
| 1. Health and Safety Regulations 1994
 |  |  |
| 1. KpH Company Policy?
 |  |  |
|  |  |  |
| 1. **What is the safe voltage for site power tools?**
 |
| 1. 230v
 |  |  |
| 1. 110v
 |  |  |
| 1. 11kv
 |  |  |
| 1. 33kv
 |  |  |
|  |  |  |
| 1. **Is the wearing of light eye protection a KpH requirement on site?**
 |
| 1. Yes – but only where the method statement/risk assessment or working conditions require it
 |  |  |
| 1. No - Never
 |  |  |
| 1. Yes - at all times
 |  |  |
| 1. Only if you have an existing eye injury
 |  |  |
|  |  |  |
| 1. **Why are radios banned on site?** 2 CORRECT ANSWERS
 |
| 1. To avoid distraction
 |  |  |
| 1. So the fire alarm can be heard
 |  |  |
| 1. In case of theft from lockers
 |  |  |
| 1. To keep power points free for the site manager
 |  |  |
|  |  |  |
| 1. **Which of the following are high-risk starting points for a fire?** 2 CORRECT ANSWERS
 |
| 1. Wet clothes hanging over heaters
 |  |  |
| 1. Clothes stored in lockers
 |  |  |
| 1. Loose waste materials and wood shavings
 |  |  |
| 1. Plasterboard
 |  |  |
|  |  |  |
| 1. **What is the correct way to perform a manual lift?**
 |
| 1. Bend at the knees and back
 |  |  |
| 1. Bend at the back
 |  |  |
| 1. Get someone else to do it
 |  |  |
| 1. Keep back straight and head up, lift with your legs
 |  |  |
|  |  |  |
| 1. **How often should site workers take part in a toolbox talk?**
 |
| 1. Once a month
 |  |  |
| 1. Every morning
 |  |  |
| 1. Never
 |  |  |
| 1. Once a week
 |  |  |
|  |  |  |
| 1. **Is smoking allowed on site?**
 |
| 1. No – not anywhere
 |  |  |
| 1. Yes – with permission from your supervisor
 |  |  |
| 1. No – unless in a designated area
 |  |  |
| 1. Yes
 |  |  |
|  |  |  |
| 1. **What is the ‘rule of thumb’ regarding wearing ear protection?**
 |
| 1. If you have a ringing sound in your ear
 |  |  |
| 1. If you have to put your thumb in your ear
 |  |  |
| 1. If you have to raise your voice to be heard at 2 metres
 |  |  |
| 1. If you are working outside
 |  |  |
|  |  |  |
| 1. **Where on site can you find information about fire and first aid arrangements?**
 |
| 1. No where there is none, it’s all just common sense
 |  |  |
| 1. In the toilet
 |  |  |
| 1. In your company safety manual
 |  |  |
| 1. On the site notice board
 |  |  |
|  |  |  |
| 1. **What should you do if you notice a hazard that no one else seems to have noticed?**
 |
| 1. Stay away from that area
 |  |  |
| 1. Report it to your supervisor immediately
 |  |  |
| 1. Keep on working and report it at the end of your shift
 |  |  |
| 1. Report it to your colleagues
 |  |  |
|  |  |  |
| 1. **Why is it important to sign in whenever you are on site?**
 |
| 1. To ensure you are working your correct hours
 |  |  |
| 1. To ensure you are accounted for in the event of an emergency
 |  |  |
| 1. The HSE need records of your working hours
 |  |  |
| 1. Signing in is optional and not compulsory
 |  |  |
|  |  |  |
| 1. **Which of these fire extinguishers is most suitable for use on electrical fires?**
 |
| 1. CO2 and dry powder
 |  |  |
| 1. CO2 and water
 |  |  |
| 1. CO2 and foam
 |  |  |
| 1. Foam and dry powder
 |  |  |
|  |  |  |
| 1. **Protective midsoles on your footwear are used to?**
 |
| 1. Increase comfort throughout the day
 |  |  |
| 1. Support your ankles and prevent them from twisting
 |  |  |
| 1. Protect your feet from falling objects
 |  |  |
| 1. Protect your feet if you step on nails or other sharp objects
 |  |  |
|  |  |  |
| 1. **Do you understand both the written and spoken English language?**
 |
| 1. Yes
2. No, I require a translator
 |  |  |
|  |

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| **Operative Print Name:** |  | **Signed:** |  | **Date:** |  |

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| **KpH Translator Print Name:** |  | **Signed:** |  | **Date:** |  |