

# ORIENTATION AND TRAINING

Research Service Employees (VA and Without Compensation/WOC)

EMPLOYEE NAME:  
POSITION TITLE:  
SUPERVISOR:  
START DATE:

The following training/orientations are required **PRIOR TO STARTING WORK.**

## ☐ **ALL Research Personnel (both VA Employees and WOCs)**

☐ Initial required training for all WOCs has been completed (**all VA employees will complete through their Service**):  
Bloodborne Pathogens and TB.

☐ Annual VA Training has been completed: Information Security Awareness, VHA Privacy Policy ([www.tms.va.gov](http://www.tms.va.gov))

☐ Supervisor Worksite Safety Orientation has been completed:

The above individual has received an orientation and safety training for his/her designated work place to include but not limited to fire, hazardous materials, emergency situations, infection control, equipment management, security, and other safety precautions and procedures. The employee has been informed that he/she is responsible for knowing and following correct operational and emergency procedures, reporting unsafe conditions, and completing all required safety training.

**Signature of Responsible Investigator/Supervisor:** \_\_\_\_\_

## ☐ **HUMAN RESEARCH for all Research Personnel**

☐ Human Subjects Protection/Good Clinical Practices training completed (**required every 3 years**) ([www.citiprogram.org](http://www.citiprogram.org))

**Signature of Responsible Investigator/Supervisor:** \_\_\_\_\_

## ☐ **ANIMAL RESEARCH for all Research Personnel**

☐ Mice ☐ Rats ☐ Rabbits ☐ Hamsters ☐ Other \_\_\_\_\_

☐ VA animal training completed (**required every 2 years**) ([www.citiprogram.org](http://www.citiprogram.org))

☐ Veterinary Medical Unit Orientation (**for on-site animal research only**): \_\_\_\_\_  
Veterinary Medical Unit Supervisor signature

**Signature of Responsible Investigator/Supervisor:** \_\_\_\_\_

## ☐ **LABORATORY WORK for all Research Personnel who conduct Human and Animal Lab research**

☐ VA Biosecurity Training completed for both VA employees and WOCs (**1-time training**) ([www.citiprogram.org](http://www.citiprogram.org))

☐ Lab-specific Orientation: ☐ Chemical use/storage ☐ Radiation ☐ Biohazards ☐ Lab equipment

**Signature of Responsible Investigator/Supervisor:** \_\_\_\_\_

\*Return Form to Research Privileges Coordinator to document employee has completed all new employee training.