

# New Teaching Staff Orientation Checklist

## Head Start

Employee Name: \_\_\_\_\_

Employee Position: \_\_\_\_\_

Date of Orientation: \_\_\_\_\_

Date of Hire: \_\_\_\_\_

The Head Start Director is required to discuss and explain each item listed below. By placing a check mark in the space, the Director verifies that the employee was informed of the expectations/requirements associated with each item.

### General Topics

- |       |     |                                                                                                                                     |
|-------|-----|-------------------------------------------------------------------------------------------------------------------------------------|
| _____ | 1.  | Employee signed a copy of the job description, was given a copy                                                                     |
| _____ | 2.  | Introduction to co-workers, supervisors, etc.                                                                                       |
| _____ | 3.  | Description of the Head Start program                                                                                               |
| _____ | 4.  | Description of Delegate Head Start program & Grantee Head Start program relationship                                                |
| _____ | 5.  | Organizational chart, chain of command, direct & indirect supervisors, etc.                                                         |
| _____ | 6.  | Work schedule, breaks, vacation days, school calendar, non-class days, etc.                                                         |
| _____ | 7.  | Instructions on timesheets, payroll, benefits, etc.                                                                                 |
| _____ | 8.  | Instructions on where to find local personnel policies OR a copy was given to the employee                                          |
| _____ | 9.  | Description of policy on absenteeism & tardiness                                                                                    |
| _____ | 10. | Dress code, personal appearance, having family/visitors in workplace, etc.                                                          |
| _____ | 11. | Social media etiquette, pictures of children prohibited on personal posts (i.e. Facebook),<br>cell phone use in the classroom, etc. |
| _____ | 12. | ERSEA procedures (if applicable)                                                                                                    |

### Classroom Instructions/Expectations

- |       |    |                                                                                                                 |
|-------|----|-----------------------------------------------------------------------------------------------------------------|
| _____ | 1. | Program policies - Head Start website <a href="https://headstart.bsacap.org/">https://headstart.bsacap.org/</a> |
| _____ | 2. | COPA                                                                                                            |
| _____ | 3. | Performance Standards (link on COPA)                                                                            |
| _____ | 4. | Safety procedures in the classroom, emergency drills, required trainings, staff/child ratio                     |
| _____ | 5. | Appropriate interaction (i.e. staff demeanor, voice level, enthusiasm, following CLASS instructions)            |
| _____ | 6. | Standards of Conduct, Code of Ethics, corporal punishment and other prohibited discipline                       |
| _____ | 7. | Reporting Suspected or Known Child Abuse policy                                                                 |
| _____ | 8. | Confidentiality of Information policy                                                                           |

***The following activities were performed PRIOR to the employee being officially hired:***

- |       |                                                                   |
|-------|-------------------------------------------------------------------|
| _____ | An interview was conducted                                        |
| _____ | References were verified                                          |
| _____ | A sex offender registry check was conducted                       |
| _____ | A state criminal background check with fingerprints was conducted |

***The following activities were performed within 90 days of the employee being officially hired:***

- |       |                                                                 |
|-------|-----------------------------------------------------------------|
| _____ | A FBI criminal background check with fingerprints was conducted |
| _____ | A child abuse & neglect state registry check was conducted      |