

Facsimile

To: Charles Sturt University - Facilities OHS Manager

Facsimile number: 02 – 6933 4346

Date:

From: _____

Declaration

Thank you for reading through the University's general site induction package. Please complete the declaration below to confirm acceptance of your responsibilities.

I have read Charles Sturt University's general induction package and agree that I will comply with all appropriate OHS legislative requirements, codes of practice and University policies and guidelines whenever working for the University.

Date: _____

Name: _____

Signature: _____

Workcover OHS general induction number (if applicable): _____

Once complete, please fax this page to 02 – 6933 4346. If you have any questions, please contact the Facilities OHS Manager.