

Before an employee begins their summer farm employment, they are required to review the 'Farm Safety Resource Disc' DVD and complete a quiz. This declaration form, quiz answer sheet and orientation checklist must be submitted to the *Summer Farm Employment Program* within 1 week of starting work.

Declaration

We confirm we are completing this safety quiz together after reviewing the Farm Safety Resource Disc and safety information provided. We agree to make safety a priority on the farm at all times.

Employer or Supervisor Name	Employer or Supervisor Signature	Employer Phone Number
Employee Name	Employee Signature	5-digit Application Number
Date		

Employer's Evaluation of Safety Information

1. The amount of safety information provided from the *Summer Farm Employment Program* is: (circle one)

Not enough	enough Just right		Too much			
2. The safety information helps me orient and train my new worker: (circle one)						
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree		
3. I prefer to receive my Summer Farm Employment Program safety information: (circle all that apply)						
In print		On a CD/DVD	On	On the internet		
Via e-mail		Via a specific website	In-po	In-person session		

Other?

Any other feedback?

The personal information collected on this form is for the purpose of determining that the required farm safety information has been completed for the Summer Farm Employment Program under the Government Organization Act. It is subject to the provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions please contact the Communication Coordinator at 310-FARM (3276), Postal Bag 600 Stettler, AB, TOC 2L0.