



SHIP8

### New Hire Onboarding Checklist

Employee Name	Quashon Russel	Today's Date	03/30/2026
Company	<input type="checkbox"/> SHIP8 <input type="checkbox"/> OAE <input checked="" type="checkbox"/> TEMP: - Axiom	Department	Wholesale Operations
Start Date	03/30/2026	Location	SAV 3

#### Safety Training: Basic and General Guidelines

- Code of Safe Practices including safety video:
  - Warehouse Safety Fundamentals (PPE, slips, trips and falls, housekeeping, hazardous materials (SDS))
  - Materials Handling Basics
  - Pallets, Storing and Stacking
  - Working Safely with Forklifts and a loading dock
- OTPAT
- First Aid and First Aid Kits Nearest location
- Emergency Action Plan –EAP (Emergency Evacuation, Earthquake, Active Shooter, Tornado, Hurricane, Bomb Threat)
- Fire Prevention & Protection (including Fire Extinguisher)
- Personal Protective Equipment (PPE): Follow your department SOP for job specific and ask Supervisor/Manager for PPE
- Conveyor Safety
- Heat Stress
- Hazard Communication (including SDS): Follow your department SOP for job specific
- Lock Out, Tag out (LOTO): Follow your department SOP for job specific
- Housekeeping
- Eyewash Station
- Electrical safety
- Fall Protection Training
- Hearing Protection & Conservation (if applicable on onsite facility): Earplugs are available upon request
- Machines & Machine Guarding (including safe operation)
- Bloodborne Pathogens (BBP)
- Back & Strains Prevention
- Safe Lifting & Ergonomics
- All Powered Industrial Truck Equipment (such as all forklifts, scissor lift, yard truck; I am not an authorized personnel to operate at any time without going through Company training and certification program regardless of my position)

I, Quashon Russel (employee) understand and acknowledge I have received the above trainings on/during my first day/first week of work at SHIP8 Inc. Company. I agree to follow the guidelines given to me and will adhere to the policies set-forth. I understand and acknowledge for those jobs requiring/involving operating machinery and/or powered industrial equipment, I must receive proper training and certified in the program. I understand if I do not follow the Company policies and guidelines set-forth listed above and/or violate any of the above policies; I will be subject to a disciplinary action and up to including termination of my employment.

Employee Signature

Team Lead/Supervisor/Manager/HR Signature

03/30/2026

Date

03/30/2026

Date