



**University of Mississippi
Non-Employee Orientation Attestation**

I acknowledge that I have completed the requirements for the orientation pieces below. I have reviewed and understand the content associated. I certify that I have received orientation on the topics below.

- ✓ Day 1 Orientation Content

- ✓ Clinical and Online Orientation Modules
 - ✓ Fire Safety
 - ✓ General Safety
 - ✓ Hazardous Communications
 - ✓ Biological Safety
 - ✓ MRI, Laser, and Radiation Safety
 - ✓ CDC Hand Washing
 - ✓ Blood Borne Pathogens
 - ✓ Patient Safety Website
 - ✓ Abuse and Neglect
 - ✓ Workplace Violence
 - ✓ Disruptive Behavior
 - ✓ Emergency Preparedness
 - ✓ Emergency Numbers
 - ✓ Campus Police
 - ✓ Quality Orientation - Patient Safety & PI

- ✓ Harassment and Diversity Statement

Non-Employee Name (Printed) _____

Non-Employee Signature _____

Non-Employee Number _____ Start Date: _____

Today's Date: _____

Department: _____

Department Manager Signature _____