



Violence & Harassment Prevention in the Workplace On-Line Training record

Circle the Correct Answer

1. Which of the following statements defines workplace violence as per the Occupational Health and Safety Act?
 - a) The exercise of a physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker
 - b) An attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker
 - c) A statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that causes physical injury to the worker
 - d) All of the above

2. Workplace violence includes domestic violence that could cause physical injury to a worker in a workplace.
 - a) True
 - b) False

3. When the person committing violence has no legitimate relationship to the workplace it is referred to as what type of violence?
 - a) Type II – Customer/Client
 - b) Type III – Inside the workplace
 - c) Type I – Criminal Intent
 - d) Type IV – Personal Relationships

4. Which of the following are considered risk factors for violence in the workplace?
 - a) Working in community based settings
 - b) Handling Cash
 - c) Working alone or in small numbers
 - d) All of the above

5. Workplace harassment is defined in the Occupational Health and Safety Act as – engaging in a course of vexatious comments or conduct against a worker in a workplace that is known or ought reasonably to be known as unwelcome.
 - a) True
 - b) False

6. A clear example of workplace harassment would be:
 - a) Speaking loudly to someone
 - b) Making offensive jokes by word or email
 - c) Asking a co-worker to join you for lunch
 - d) Having lunch at your workstation

Date:	<u>PLEASE PRINT CLEARLY</u>	Supervisor Name:
Employee Name:	Department	Supervisor Signature:
Employee Signature:		Supervisor Email
Employee Email Address	Employee Phone Extension	Supervisor Phone Extension

This test record must be completed by the individual participating in the training. This test record is the documented record of your participation in this training. The intent of this record is to prove one’s review of specific training materials. By signing these documents, you agree that you have reviewed the appropriate materials in detail and understand them. Please forward the original or a copy of this test record to the EOHSS office. Please retain a copy for your records. **If you are from the Faculty of Health Science, please send your forms to the FHS Safety Office in HSC 1J11 or fax to 905-528-8539**