

## RISK ASSESSMENT WORKSHEET

<b>Risk Assessment Title:</b>					
<b>Details of Process:</b>					
<b>Risk Register:</b>			<b>Risk Assessment Number:</b>		
<b>Campus</b>		<b>Faculty/Division</b>		<b>School/Department/Centre</b>	
<b>Building</b>		<b>Room No.</b>		<b>Assessment Date</b>	

Risk Assessment Team (only those involved in the actual assessment)						
Name	Signature	Date		Name	Signature	Date

**Hazard Categories applicable to this Risk Assessment**

Animal/Insect/Vegetation <input type="checkbox"/>	Equipment/Machinery/Vehicles <input type="checkbox"/>	Manual Handling/Ergonomics <input type="checkbox"/>
Biological <input type="checkbox"/>	Outdoor Hazards <input type="checkbox"/>	Psychological/Social <input type="checkbox"/>
Chemical <input type="checkbox"/>	Water/Gases/Liquids <input type="checkbox"/>	Physical Hazards <input type="checkbox"/>
Hazardous Areas <input type="checkbox"/>	Radiation <input type="checkbox"/>	Other <input type="checkbox"/>

**Approval  
Supervisor**

Name:
Signed: <span style="float: right;">Date:</span>

INSERT PHOTO or DIAGRAM

AS APPROPRIATE

Hazard	Current Controls	Likelihood	Consequences	Current Risk	Proposed Controls	Responsible Person	Likelihood	Consequences	Residual Risk
1	2	3	4	5	6	7	8	9	10