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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| S i t e R i s k A s s e s s m e n t F o r m | | | | | | | | | | | | | | | | |
| Task/Activity:  Site location:  Prepared by: Date: | | | | | | | | | | | | | | | | |
| LOCAL HAZARDS APPROPRIATE TO THE SITE ON WHICH ACTIVITY IS TAKING PLACE Refer to page 5 (Part 1) of H&S support pack. Also consider volunteer’s abilities. | | | | | | | | | | | | | | | | |
| Hazard | | Possible outcome | | | Persons at risk | | | Risk level  Low Med High | | | Control measures | | | Who is responsible? | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| THESE HAZARDS MUST BE REASSESSED JUST BEFORE THE ACTIVITY TAKES PLACE. | | | | | | | | | | | | | | | | |
| Generic risk assessment forms applicable: | | | | | | | | | | | | | | | | |
| Activity risk assessment forms applicable: | | | | | | | | | | | | | | | | |

**NOTE**: This form must be sent to the relevant Area Coordinator at least two weeks in advance of your planned activity for sign off.