



Risk assessment form

Date:

Activity/Role:

People who may be at risk of harm (as a result of this activity/role):

Task	Hazards	How Likely is it? (Score 1 – 5)	How serious is it? (Score 1-5)	Level of risk (multiply scores in previous two columns)	Control measures What action(s) would reduce the risk?

Summary:

Proposed actions to reduce risks:	Who is responsible for this:

Risk assessment carried out by: _____

Review date _____

The information in this document is for information only. It is not a substitute for professional advice and we cannot accept any responsibility for loss occasioned as a result of any person acting or refraining from acting upon it.