

HEALTH & SAFETY RISK ASSESSMENT

# TEMPLATE FOR SCHOOLS

**Assessment Reference Number:**

**School/Department:**

**Location:**

**Assessor/s:**

**Date of Assessment:**

**Work activity/feature assessed:**

| Hazards Identified | Person/s at Risk | Controls in Place | Risk Rating | Action Required |
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**Assessor/s Comments:**

**Managers/Supervisors Comments:**

| Further Details of Action Required | Person Responsible | Action Date |
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**Assessor/s Signature:**

**Managers/Supervisors Signature:**

**Review Date:**