



## GENERAL GENERIC RISK ASSESSMENT

Type of Activity:

Significant Hazards	Persons at risk	Existing Controls	Risk Rating L/M/H	Additional Controls Required

Name of Risk Assessor:

Signature of Risk Assessor .....

Date of Risk Assessment .....



**Risk Assessment: Manager's Action Plan**

Action Required	By Who	Risk Level	Target Date	Comments	Date Completed

**Managers Signature:**..... **Position:**..... **Date:**.....

**Review Due Date**..... **Actual Review Date**.....

**Additional Information:**

**Name of Risk Assessor:**

**Signature of Risk Assessor** .....

**Date of Risk Assessment** .....