



RISK ASSESSMENT MINI TEMPLATE

THINK • IDENTIFY • EVALUATE • CONTROL • REVIEW

Investigation / Activity: _____	Date: _____
Class / Year: _____	Group / Name(s): _____
Teacher: _____	Location: _____

1 IDENTIFY HAZARDS What could cause harm?

HAZARD What is the hazard?	HOW COULD HARM OCCUR? Who might be harmed and how?	WHO MIGHT BE HARMED? Students / Staff / Others
1		
2		
3		
4		
5		

HAZARD EXAMPLES

- Heat / Flames
- Chemicals
- Breakage
- Electricity
- Slips / Trips
- Other

2 EVALUATE THE RISK How serious is the risk?

HAZARD (from above)	LIKELIHOOD 1 = Rare 5 = Almost certain	CONSEQUENCE 1 = Minor 5 = Severe	RISK RATING L x C	RISK LEVEL
1				<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
2				<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
3				<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
4				<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
5				<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High

RISK RATING GUIDE

		LIKELIHOOD (L)				
		1	2	3	4	5
CONSEQUENCE (C)	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5

1-5 Low (green)
6-12 Medium (yellow)
13-25 High (red)

3 CONTROL MEASURES What will you do to reduce the risk?

CONTROL MEASURES List the actions / equipment / procedures to reduce the risk.	RISK LEVEL AFTER CONTROLS (Low / Medium / High)
1	
2	
3	
4	
5	

CONTROL EXAMPLES

- Wear PPE
- Use in fume hood / well-ventilated area
- Use equipment correctly
- Wash hands
- Safe disposal
- Follow instructions

4 REVIEW AND SIGN OFF Check and confirm.

<p>REVIEW Have all significant risks been identified and controlled?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, what else needs to be done?</p> <p>_____</p> <p>_____</p>	<p>GROUP CHECK We have followed the controls and are ready to proceed.</p> <p>Group Signature(s):</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>TEACHER CHECK Risk assessment reviewed. Safe to proceed.</p> <p>Teacher Name: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
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STOP & THINK



If anything changes, STOP and reassess. Safety first.