

GARDEN ORGANIC SPECIFIED RISK ASSESSMENT FORM

Date Assessed		Assessor:		Assessment No:		Date Actioned:		Monitoring:	
		Name:							
GARDEN ORGANIC Event:		Title:		GARDEN ORGANIC		Actioned by:		Monitored by:	
School Visit		Sig:							
Location:		Activity:		Inclusive Dates:					
Hazard Identified	Who is at Risk	Worst Case Outcome		Probability Rating		Score Risk Level (Outcome x Probability) =			
		High – Certain Death	4	Probably	4	Control Measures:			
		Medium – Serious Injury	3	Possibly	3				
		Low – Treatable Injury	2	Unlikely	2				
		Very Low – Injury Unlikely	1	Remotely	1				
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Template SPECIFIED RISK ASSESSMENT FORM: GARDEN ORGANIC Ryton Gardens