

DIVISION OF INFORMATION AND COMMUNICATION SCIENCES

Risk Assessment – Experiment/Task/Process

To be completed if there is no standard operating procedure/safe work method available for the experiment or task. Prior to completing this please ensure you read the ICS Hazardous Substances Policy.

Assessor (print):..... Phone: Date: ___/___/___

Location(s) of Experiment

Description of Experiment/Task/Process

.....
.....
.....
.....

Equipment/Services to be used

.....
.....

Substances to be used:

Substance Name	MSDS Yes/No¹	Hazardous? Yes/No²	Risk Assess't Date³	Nature of Hazard

Controls to be applied to reduce risks:

.....
.....

I certify that the risks of this experiment/task/process are negligible or adequately controlled

.....
Supervisor: Date:
(Print name)

.....
Lab Manager: Date.....
(Print name)

¹ If not in relevant Laboratory Register of Hazardous Substances search Infosafe or request from Manufacturer.

² If yes go to next column. If no, no further action is required for this chemical.

³ If risk Assessment is available you must read and understand it. If not available or the date is more than five years old complete the Risk Assessment – Hazardous Substances form.