**Event Name:** #

**Date of event:** #

**Location:** #

**Date of assessment:** #

**Name of person conducting assessment:** #

| **Ref No.** | **Hazards Identified** | **Risks Identified** | **Severity/****Consequence***How bad could it be?* | **Frequency or Likelihood***How often could it happen?* | **Level of Risk***See attached risk matrix* | **Current Control Measures***What will be done to control the risk?* |
| --- | --- | --- | --- | --- | --- | --- |
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