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 Educational Visits Risk Assessment Form

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| **School/Organisation:** |  | **EVC or name of visit organiser:** |  |
| **Description of visit:** (including activities and number of students/teachers) |  | **Date(s) of visit:** |  |
| **Assessor:**(Signature) |  | **Date assessment completed:** |  |
| **Checked by:**(Signature) |  | **Date assessment checked:** |  |

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| **Significant hazards**List anything that could cause harm | **Who may be at risk?**e.g. students, staff, parents, specific groups or individuals | **Likelihood of harm**Remote, very unlikely, unlikely, possible, very likely | **Control measures**How will the risk be minimised? | **Residual risk**After controls are put in place, what is the risk? (use Remote - Very likely scale) |
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