



Fieldwork Assessment Form FA1

(Refer to Notes for Guidance before completing this form)

School Assessment No.	
Title of Fieldwork Activity:	
Location(s) of Work:	
Duration (incl. dates From / To) :	

Brief Description of Fieldwork:

Hazard Identification: Identify all the hazards; evaluate the risks (low / medium / high) and describe all necessary control measures.

Hazard (s)	Risk L / M / H	Control Measures	Risk after Control L / M / H
Physical Hazards (e.g. extreme weather conditions, cliffs, caves, mountains, marshes, quicksand, fresh / seawater, mines, quarries, tides)			

<p>Biological Hazards (e.g. poisonous plants, venomous / aggressive animals, soil or water micro organisms, insects)</p>			
<p>Chemical Hazards (e.g. pesticides, dusts, contaminated soils, chemicals on site)</p>			
<p>Man-made hazards (e.g. machinery, electrical equipment, vehicles, insecure buildings, slurry pits, power and pipelines)</p>			
<p>Personal Safety (e.g. lone working, attack on person or property, first aid)</p>			
<p>Environmental impact (e.g. refuse, pollution, disturbance of eco-systems)</p>			

Other hazards (e.g. procedural, manual handling) Please specify.			
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**Continue on separate sheet if necessary*

Emergency Procedures: Specify arrangements for first aid, special emergency procedures, survival aids, communication, etc.)

Additional Information: Identify any additional information relevant to the fieldwork activity, including supervision, training requirements, information, specialist equipment or clothing, inoculations, etc.

Contact Information: Include details of both the University designated contact and on-site contact.

University	Name:	Tel. Contact:
On-site	Name:	Tel. Contact:
Address of residential base:		

Has necessary training and information been given?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Is there adequate provision for those with health problems or disabilities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Are there adequate First Aiders available?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Is there suitable supervision (i.e. Staff to Student ratio)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Is permission required to work on site?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Are there suitable travel arrangements and licensed drivers?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Is adequate insurance cover in place? <i>(Contact Finance Office for advice, 50-9154)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Have all participants submitted next of kin information to field trip organiser / School Office?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Have route notification schedules been provided to Police or Coastguard?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Assessment carried out by:

Name:		Date:	
Signature:		Review Date:	
Title (e.g. Group Leader, Lecturer, Research Student, etc):			

Assessment Authorised by Head of School / Fieldwork Supervisor:

Name:		Date:	
Signature:			