

WORKSHOP ACTIVITY RISK ASSESSMENT CHECKLIST

U3A Name:	
U3A Interest Group	
Location:	
Date:	
Description of Activity:	

HAZARD		Yes	No	N/A	COMMENTS
Use of Hand Tools					
1	Are tools sharp and in good condition? (e.g. no damage, splitting of handles etc)				
Electrical Power Tools					
1	Portable Appliance tested?				
2	Double insulated?				
3	Visual inspection of leads and connections made?				
Fixed Machinery (lathes etc.)					
1	Are electrical connections & wiring in good condition?				
2	Is the equipment suitably earthed?				
3	Are appropriate guards fitted and in good condition?				
Personal Protective Equipment (PPE)					
1	Does the activity require the following: a. Eye Protection b. Hearing Protection c. Dust Mask d. Gloves e. Safety shoes				
Hazardous Materials					
1	Are the materials used hazardous? (Toxic, Harmful, Irritant, Dusty etc. see container label)				
2	Does the material require special precautions in use? (e.g. the wearing of PPE)				
Workplace Hazards					
1	Are the floors free from trip hazards & escape routes clear?				
2	Are precautions in place to prevent or respond to fire?				
3	Does the activity require special precautions? (e.g. removal of jewellery, tying back long hair)				

Signature

Position

Date