UNIVERSITY OF PORTSMOUTH

University of Portsmouth

Health and Safety Office

ACKNOWLEDGEMENT OF RISK ASSESSMENTS

How to use this document

Please discuss thoroughly the hazards on the risk assessment/s with those who identified as having involvement in the task/event/equipment etc. The discussion must include the control measures that were introduced to avoid an accident or ill-health happening.

Ensure the people you are discussing the risk assessment/s with have a full understanding of the hazards and risks and what is expected of them in controlling the risks and any action they need to take. For example following a defined procedure in the way a task should be done or following local rules in a specific area.

Task/Job name	
Area/Location	
Name of person communicating the risk assessment/s	
Date of Task or Event	

PLEASE READ THE NOTICE BELOW BEFORE SIGNING THIS FORM

I acknowledge that I have read and understood the Risk Assessment/s associated with this task/event/equipment etc.

Name	Signature	Faculty/Department	Date



University of Portsmouth Health and Safety Office

PLEASE READ THE NOTICE BELOW BEFORE SIGNING THIS FORM

I acknowledge that I have read and understood the Risk Assessments associated with this task/event/equipment etc.

Signature	Faculty/Department	Date
	Signature	Signature Faculty/Department