

Form 607.1.2 : Risk Assessment for Amber Activities



Use this form for -->



Lethbridge School District
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Date:	
School:	
Activity:	
Teacher in Charge:	
Destination:	
Purpose of activity:	
Grade level(s):	
# of students:	

Safety Plan:

Briefly describe the assessment and preparation that has occurred regarding the following, as appropriate:

1. Hazards or risks associated with activity.

2. Equipment or safety precautions taken.

Form 607.1.2 Risk Assessment for Amber Activities (Continued)

3. Contingency plan(s):

Supervision Plan:

1. Identify the roles and responsibilities of supervisors (large and/or small group supervision, group management, discipline, night checks, activity instruction, other:

2. When and how will volunteers be briefed regarding their roles, responsibilities and expectations?

Emergency Plan:

1. First aid, survival and repair kits (as appropriate) are stocked and accessible: Yes No

2. What is the level of first aid training within the group?

3. How will emergency services (police, fire, ambulance, search and rescue) be activated if needed in the area?

4. What steps will you follow if a participant is ill or has a non-life threatening injury?

Name of Teacher in Charge (please print)

Date

Signature

Name of Principal (please print)

Date

Signature

Associate Superintendent (if required) (please print)

Date

Signature

Authorization for collection of personal data:

Personal information is collected under the authorization of the Alberta Freedom on Information and Protection of Privacy (FOIP) Act for the purpose of completing the off-site activity described above.