

# STUDENT PROJECT RISK ASSESSMENT FORM

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RISK ASSESSOR NAME

ASSESSMENT DATE

VERSION NO.

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## GENERAL INFORMATION

STUDENT NAME

STUDENT ID NO.

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SUPERVISOR'S NAME

DATE TO BEGIN WORK

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COURSE TITLE	
PROJECT NAME	
LOCATION OF PROJECT WORK	
PROJECT PURPOSE	
PROJECT DESCRIPTION <i>Detail any machinery, equipment, and chemicals used, as well as if other parties will be involved with completing the work.</i>	



ADDITIONAL INFORMATION

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ASSESSMENT CONCLUSION

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ASSESSOR NAME

ASSESSOR SIGNATURE

DATE

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STUDENT NAME

STUDENT SIGNATURE

DATE

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SUPERVISOR NAME

SUPERVISOR SIGNATURE

DATE

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