TUTOR:		VENUE:													
CLASS:			ARTFORM:												
POTENTIAL HAZARD (please refer to the Arts Service Practitioner Risk Assessment for clarification and give details in the spaces provided below the hazards if appropriate).	IS THERE A RISK? Y/N		PLEASE DESCRIBE REMEDIAL ACTION (please refer to the Arts Service Practitioner Risk Assessment for suggested remedial actions / control measures).	DATE (please enter the date at the top of each column and intitial against each line below once you have assessed the risk and taken any remedial action)											each ial
Venue size/space obstructed or insufficient															
Furniture or other items in the activity space															
Loose items such as cables, instruments, classroom															
resources in the activity space.														_	
Spillages									_					_	
Flastrical Emuinment (must be DAT tested within last 40															
Electrical Equipment (must be PAT tested within last 12 months)															
Specialist Instruments and Equipment															
Participants (physical hazards - clothing, footwear etc)															
Participants (additional needs e.g. medical, ASN)															
Lone Working								-							
										1					
OTHER HAZARDS NOT INCLUDED ABOVE (please list):															
PLEASE CONFIRM YOU ARE AWARE OF THE VENUE'S FI									_						\parallel
PLEASE CONFIRM YOU HAVE READ THE YMI PRACTITIO		K ASSESSI SIGNED:	VIENT, CODE OF PRACTICE AND WORKING WITH YOU	DATI		LE DO	CUME	NTS		<u> </u>					\vdash
		SIGNED:			c:										