

Columbia College Hazard Form

Please print on this document.

1. HAZARD IDENTIFICATION <i>(The individual who identified the hazard is to complete Section #1.)</i>												
Name:												
Program/ Department:												
Phone Number:	(Work)	(Home)	(Cell)									
Location of Hazard												
Actual Hazard <i>(Please describe the hazard)</i>												
Recommended Action: What do you think the Facility Manager or Manager in charge should do to ensure that this hazard does not recur? If an incident occurred, then what do you think would prevent another incident from occurring?												
Place an X in the most appropriate column pertaining to the hazard observed. <table border="1" style="margin: 10px auto; width: 80%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="width: 20%; text-align: center;">High Risk</td> <td style="padding: 5px;">Hazard may result in serious injury (possibly death), serious environmental impact or significant damage to property.</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Medium Risk</td> <td style="padding: 5px;">Hazard may result in sustained injury, moderate environmental impact or damage to equipment</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Low Risk</td> <td style="padding: 5px;">Hazard may result in negligible to minor injury or environmental impact.</td> </tr> </table>				<input type="checkbox"/>	High Risk	Hazard may result in serious injury (possibly death), serious environmental impact or significant damage to property.	<input type="checkbox"/>	Medium Risk	Hazard may result in sustained injury, moderate environmental impact or damage to equipment	<input type="checkbox"/>	Low Risk	Hazard may result in negligible to minor injury or environmental impact.
<input type="checkbox"/>	High Risk	Hazard may result in serious injury (possibly death), serious environmental impact or significant damage to property.										
<input type="checkbox"/>	Medium Risk	Hazard may result in sustained injury, moderate environmental impact or damage to equipment										
<input type="checkbox"/>	Low Risk	Hazard may result in negligible to minor injury or environmental impact.										
NOTE: High risk hazards must be reported immediately to the Facility Manager or Manager in Charge.												
Date:		Signature										
Please forward this form to the Facility Manager or Designate or Manager in Charge.												

2. HAZARD ANALYSIS *(To be completed by the Facility Manager or Manager in Charge.)*

Name:

Program/
Department:

Phone Number:

NOTE: Please review the college document "Workplace Hazards and Working Alone Regulations" before completing the following questions.**Risk Assessment: A x B x C = Risk**

Frequency of Exposure	A	Probability of Occurrence	B	Severity of Consequence	C
Continuously	10	Most Likely	1.0	Catastrophic	20
Frequently	6	Possible	0.6	Fatal	10
Occasionally	3	Conceivable	0.3	Serious	5
Infrequently	2	Remove	0.1	Minor	2
Rarely	1	Inconceivable	0.05	Negligible	1

Risk Score:

Prioritization: >10 High Risk

3 – 10 Medium Risk

0 – 3 Low Risk

Additional Comments on Analysis:

3. HAZARD CONTROL *(To be completed by Faculty, Manager or Designate. If more space is required then photocopy this document and attach as needed.)*

The following hazard control action plan may suggest a number of tasks, equipment or duties to be changed, addressed, fixed, repaired, or it may require retraining or new procedures to be written. Each task must be assigned to an individual with an expected completion date and subsequent follow-up. Hazards assessed as "High Risk" must have immediate target dates for the implementation of controls. Engineering Controls (elimination, substitution, or isolation of hazard) is the most desirable control method. Administrative Controls (Safe Work Procedures) are acceptable if Engineering Controls are not feasible or do not completely eliminate or control the hazard. The assignment of Protective Personal Equipment to control the hazard should be considered a last resort.

Item	Identified Task of Job or Hazard	Current Control Method	New Control Method Required	To be Completed by (Name)	Target Date for Corrections
1					
2					
3					
4					

Date:

Signature:

This completed Hazard Form must be forwarded to the President. Documented follow-up on all recommended action and controls is required and is subject to internal and external health and safety audits.

4. PRESIDENT APPROVAL

The President will review the Hazard Form and may discuss same with those involved and/or seek input from others. The President will approve, modify or not approve each item listed as Item 1 to 4 under the heading Hazard Control

Item	Comments	Signature	Date
1			
2			
3			
4			