

Excursion Risk management

Date		Destination	
Excursion Coordinator		Mobile phone	
Depart time		Return time	
Proposed Activities		Water Hazards	
Transport		Proposed route	
Number of Students		Number of Adults	

Checklist

Student List attached	<input type="checkbox"/>	Mobile Phone	<input type="checkbox"/>
Adult list attached	<input type="checkbox"/>	Adult contact information	<input type="checkbox"/>
Mobile Phone	<input type="checkbox"/>	Student medical information	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

Please note: Adult to student ratio will vary for different activities. Ensure that the ratio and qualifications of the adults provide adequate student safety for each type of activity.

Signed Coordinator _____ Date _____ Signed Boarding Manager _____ Date _____

Activity	Hazard	Risk (use matrix below)	Control measure

		Consequence				
		Insignificant	Minor	Moderate	Major	Catastrophic
Likelihood	Almost Certain	Moderate	High	High	Extreme	Extreme
	Likely	Moderate	Moderate	High	Extreme	Extreme
	Possible	Low	Moderate	High	High	Extreme
	Unlikely	Low	Low	Moderate	High	High
	Rare	Low	Low	Low	Moderate	High

Signed Coordinator _____ Date _____ Signed Boarding Manager _____ Date _____