



THE UNIVERSITY OF  
MELBOURNE

## AFTER HOURS PERSON OR EQUIPMENT FORM

This form is to be used in conjunction procedure After Hours Risk Management (UOM 323).

### Information of Staff / Student

Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Contact: \_\_\_\_\_ Date: \_\_\_\_\_

### Information of Activity

Activity: \_\_\_\_\_  
Date: \_\_\_\_\_ Duration: \_\_\_\_\_

### Questionnaire

1. Has a Risk Assessment been conducted: Y / N
2. Has the level of Risk been assessed:  
(must be below HIGH) Y / N
3. Are appropriate risk reduction measures in place: Y / N
4. Are emergency procedures in place where required: Y / N

### Emergency Procedures

Actions: *(These should be determined by both the person undertaking the task and the responsible manager)*

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### Actions Completed

Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Signature: \_\_\_\_\_  
HOD: \_\_\_\_\_ Signature: \_\_\_\_\_

This form should be submitted to the Head of Department prior to staff / students working after hours, or when equipment or experiments will be operating after hours.