# ECS Project Information Form

Name:

Course :

Supervisor :

**Project Name:**

**Project Description: (please include a reasonable level of detail to help evaluate your risk analysis.)**

Risk Analysis

Does your project contain anything that can cause serious harm or death?

eg building /modifying things with voltages over 60V, Chemicals, Moving machinery (eg Tank/Marvin) , Flying components (eg Phantom UAV, Plane), Bodies of water.

YES ☐ (Major) NO ☐

If Yes

Please contact the School Safety Officer or Electronics Technicians to talk through

your Safety Plan

**Otherwise**

Does your project contain anything that can cause **harm or Injury?**

eg building /modifying things with voltages up to 60V, Moving machinery ( .eg. desktop Minions), Flying components e.g. (micro Quad rotor, Parrot AR Drone, heavy items)

YES ☐ (Medium) NO ☐

If Yes, please Complete a Safety Plan, and send to Safety Officer

**Everyone to complete.**

Computers are an integral part of all projects.

Describe how you will manage computer related risks such as Occupational Over Use, Cable management, etc.

Eg taking breaks, Keeping cables tidy and not messy, etc

**General Project information – Student or team to fill out, if in any doubt select yes.**

Is your Project (it may be be both.)

In-house eg internal school project ☐ Industry based or have an external client ☐

In your project will you being working or testing at any industry workplace or external sites.

This includes meetings at client offices, or visits to sites.

YES ☐ NO ☐

Have you been Health and Safety inducted into the industry workplace or external sites

YES ☐ NO ☐

Does your Project use human test subjects?

YES ☐ NO ☐

Will you have Ethics Approval before you start testing?

YES ☐ NO ☐

If you have any doubts on which category your project falls into please contact the School Safety Officer, to help evaluate the safe risk.