|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date  Prepared | |  | | | Serial  Number |  | | |
| RE: | |  | | | Action | Immediate Rectification  Inclusion in Safety Plan | | |
| Room | |  | | | Hazard |  | | |
| Designation | |  | | |  |  | | |
| Who is at risk | | Faculty  Students  Lab Personnel and Cohorts  Equipment | | | Severity |  | | |
|  | |  | | | Endorsement No. / Summary |  | | |
| Risk Evaluation | | | | | | | | |
| Fire | Smoke | | Bomb Threat | Earthquake | | Protest | Tsunami | Typhoon |
| High  Med  Low  N.A | High  Med  Low  N.A. | | ☐High  Med  Low  N.A. | ☒High  Med  Low  N.A. | | High  Med  Low  N.A. | High  Med  Low  N.A. | High  Med  Low  N.A. |
| Details: | | | | | | | | |
| Action: | | | | | | | | |
| Prepared By: | | | | | | | | |
| Remarks/Comments: | | | | | | | | |
| Noted by: | | | | | | | | |