## **Occupational Exposure Risk Assessment Form**

## **Employee Information**

Name
Employee ID
Department/Unit
Job Title
Job Title
Assessment Data
Assessment Date
Exposure Details
Type of Hazard
Description of Exposure
Description Exposure
Route of Exposure
Todae of Exposure
Exposure Duration (hours)
Exposure Duration (riburs)
Eveneure Fragueney
Exposure Frequency
Risk Evaluation
Risk Level
C Low C Medium C High
Contributing Risk Factors
Existing Controls
Recommended Additional Measures

## **Assessment Review**

Assessor Name	
Assessor Title	
Date of Review	
Signature	