



To be completed on the day of the activity

PART 1: SITE SAFETY INSPECTION

Group/ Individual name:

Date:

Weather:

Location:

Activity description:

GENERAL SAFETY MEASURES

Before you begin your works, make sure you can tick of the following. If you can't you should contact Council before continuing with the activities.

A first aid kit is located on site and all participants know of its whereabouts.

All participants have signed a Volunteer Registration Form and understand their responsibilities.

All participants have been notified of hazards and risks and necessary actions have been taken to remove or minimise them.

All participants are wearing appropriate personal protective equipment including; sturdy shoes, long sleeves and pants, hat, gloves and any other identified PPE required.

There is no current fire ban or high fire danger warning, or other extreme weather conditions.

You are working with at least one other group member on site.

A first aid person is present:

Name:

Number:

HAZARD CHECKLIST - RUN THROUGH ALL IDENTIFIED HAZARDS AND SOLUTIONS WITH PARTICIPANTS

Describe or identify any hazards that may impact participants activities:

PART 2: MONITORING					
	TOTAL NUMBER OF VOLUNTEERS:				
	TOTAL HOURS (Sum of each volunteers hours)				
PROGRESS AND OBSERVATIONS					
WEEDS		Area/amount removed/treated	Species removed:		
		Method of removal:			
		Hand pulling			
		Drill and fill			
		Cut and paint			
FLORA		Total number planted:	Rare flora observed:		
FAUNA		Species observed (direct sightings):	Species observed (indirect: scats, tracks):		
General observations:					
Follow up required:					
Subjective Quality Score:					
Before:	/ 10	After:	/ 10	Work completed:	%