## **MSI Risk Assessment**

Company Name	Prepared By			
Workplace Location				
Date Prepared	Date Reviewed			
Assessment				

Assessment				
Task (List 5 separate tasks)	MSI Risk Factor	Control		
Other Recommendation	ons.			
other Recommendation	, i.e.			
Other Notes:				
Employer Name	Employer Signatu	ure Date		
Disclaimer: This resource is intended for guid content this disclaimer may be removed to fu	lance and employers are advised to customize this document or design their	r own to meet their business needs and legal obligations. Once customized from its ns using it from their responsibilities under applicable legislation. If you need assist	original	

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## **MSI Risk Assessment**

Who Attended			
Print Name	Signature		

