Date of Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Attendees** |
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**Supervisor/Manager/Presenter/Trainer:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**START TIME:** \_\_\_\_\_\_\_\_\_\_ **END TIME:** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Topics Discussed:**

Use of risk or hazard assessment and safe work practice:

Other materials referenced:

Video used:

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| --- |
| 1) |
|  |
| 2) |
|  |
| 3) |
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| **Concerns Identified:** |
| **Issue raised** | **Person assigned** | **Action required** | **Date for completion** |
|  |  |  |  |
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