



CAS Experience Risk Assessment Form

During a CAS experience or project, participants may be exposed to risks and it is important that these risks are identified and assessed. This form is to be completed when a student undertakes a CAS activity that is not a normal school activity or is not an activity organized by Daystar Academy. You need to complete this form with the help of your CAS advisor and/or parents. Your supervisor and a parent will also need to sign this form. **Students should submit this form to the CAS supervisor during the planning stage of a CAS experience/project, and minimally 2 weeks prior to the experience.**

CAS experience Information	
Student Name(s)	
Name of experience or CAS project	
Organization running the activity (if applicable)	
Supervisor's name (at organization)	
Supervisor's contact information	
What duties and activities will you be expected to carry out?	

	Yes / No?
Is the supervisor known to your family, parents, and/or school?	
Does the organization have liability insurance (if applicable)?	
Will you be attending this activity on your own?	
<ul style="list-style-type: none">If you answered "yes," then have you discussed with your parents a plan of action should you feel at all uncomfortable during your experience?	
In the event of an emergency: <ul style="list-style-type: none">Have an emergency contact number to call.Ensure your supervisor has emergency contact details.Remember that you can call 911 if needed.	
Transport to and from the activity	
<ul style="list-style-type: none">My parents will organize transport to and from the venue	
<ul style="list-style-type: none">My parents are OK with me making my own way to and from the venue (public transportation, driving myself, riding with others)	

Record a method of dealing with any potential risks that you may face while participating in this experience. This should be filled out and/or reviewed with your parent and/or CAS advisor.

Potential Hazards/Risks	Treatment/Avoidance
e.g. Falling from a ladder while building	Ensure someone is holding the ladder at all times and check stability of ladder and suitability of the task. Suggest alternative task if considered dangerous.

On-site Supervisor to complete:

I agree that the above information I have provided is correct and that I will follow the procedures outlined above.

On-site supervisor's Name	
On-site supervisor's signature	
Date	

Parent to complete:

I agree to my child attending the above experience and I am satisfied with the risk assessment performed on this activity.

Parent/Guardian's Name	
Parent/Guardian's signature	
Date	

CAS coordinator to complete:

I am satisfied with the above risk assessment and approve this CAS experience. Yes / No

I have some concerns about the details you have provided on this form. Please schedule a meeting to discuss.

Coordinator's Name	
Coordinator's signature	
Date	

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