

## Risk Assessment for Low Risk Working Away and Conferences

<b>Full Name:</b>	
<b>Description</b> <i>e.g. Conference attendance on the subject of...</i>	
<b>Location of activity</b> <i>[enter specific details of the location including name of institution, city, country, and any accommodation if applicable]</i>	<b>Dates of travel/work away</b> Leaving Cambridge/UK on:  Date of return to UK/Cambridge:  <i>(A copy of your itinerary should be sent to the Safety Officer with this form)</i>
<b>Name and contact details of your host:</b>	
<b>Assessment of Risk</b> – The hazards and consequent risks of this activity are similar to what I encounter doing low risk work at Cambridge (e.g. office work, attending lectures). This is therefore a low risk activity. The statements below list the precautions I will take to avoid higher risks.	

- I will follow the UK Foreign and Commonwealth Office (FCO) Travel Advice. I understand that this risk assessment is suitable only for travel to countries considered safe according to FCO advice.
- I will use a regular mode of travel provided by a reputable company, allowing adequate travel time to avoid unnecessary risks.
- I will not travel if adverse weather, natural disaster or civil disturbance is indicated.
- I have read the University of Cambridge Travel Insurance Policy and am aware of all exclusions (including higher risk leisure activities).
- I am aware that certain types of accommodation (e.g. Airbnb) should not be used as per University and Departmental policy.
- My itinerary and contact number has been posted with a Departmental contact (e.g. Supervisor, local Administrator).
- I will follow the safety advice and guidance of the host organisation.
- I will report any safety concerns to the host organisation and/or to CU Philosophy Faculty management.
- I will follow ergonomic guidelines regarding use of laptops and other computers as far as practicable.



- I will avoid lone working and travelling alone as far as possible.
- I understand that further risk assessment is required for higher risk activities e.g. visits to developing countries, work in communities, laboratory work etc, and will consult the Departmental Safety Officer to obtain approval as per the Department procedure for Work and Travel Away.

**Person working away:** I am signing to indicate that I have read and will abide by the statements above and will carry out additional risk assessment where necessary.

First name:	CRSid:	Signature:
Surname (family name):	Emergency contact number:	Date:

**Supervisor/ Manager/Safety Officer:** I am signing to indicate that this is sufficient as risk assessment and I give my permission for the intended travel/work away.

First name:	Signature:
Surname (family name):	Date: