RISK ASSESSMENT COMPLIANCE ACKNOWLEDGEMENT

Unit:	
I acknowledge that I have reviewed the Hazard Register, am aware of the risks present in my area of responsibility and that adequate controls in compliance with University of Waterloo safety programs have been implemented to reduce risk to an acceptable level.	
Name:	Position:
Signature:	Date:
Name:	Position:
Signature:	
Name:	Position:
Signature:	Date:
Name:	Position:
Signature:	
Name:	Position:
Signature:	
Name:	Position:
Signature:	
Name:	Position:
Signature:	Data
Name:	Position:
Signature:	Date:
Name:	Position:
Signature:	Date:

