



GALLERY VISITS YOU OFFSITE SAFETY ASSESSMENT

Thank you for requesting a Gallery Visits You outreach program with an NGV Voluntary Guide at your organisation.

The NGV is committed to ensuring that our volunteers work in a safe work environment and require participating organisations to complete a safety assessment of the work site where the program will be delivered.

A new safety assessment must be completed annually, or earlier if there are changes to the work site.

The staff member responsible for coordinating the Gallery Visits you program at your site should complete this safety assessment.

The completed safety assessment should be sent to the Gallery at least two weeks prior to the program.

Email tour.bookings@ngv.vic.gov.au

Post NGV Learn
PO Box 7259
Melbourne
VIC 3004

Thank you for your assistance.

ORGANISATION DETAILS

NAME OF ORGANISATION	
ADDRESS OF ORGANISATION	
LOCATION FOR DELIVERY OF GALLERY VISITS YOU PROGRAM	

PROGRAM COORDINATOR DETAILS

NAME	
POSITION	
TELEPHONE	
EMAIL	

PERSON RESPONSIBLE FOR OCCUPATIONAL HEALTH AND SAFETY

NAME	
POSITION	
TELEPHONE	
EMAIL	



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OCCUPATIONAL HEALTH AND SAFETY INFORMATION

Does your organisation have an Occupational Health & Safety Strategy in place?

YES NO

Does your organisation have a written Occupational Health & Safety Policy?

YES NO

Does your Organisation use safe work procedures including assessments to minimise risk?
(eg: risk assessments, job safety analysis)

YES NO

Does your organisation have instructions for local emergency procedures
(eg: evacuation, first aid)

YES NO

Will an on-site induction be provided to NGV volunteers at the site where the Gallery Visits You Program will be delivered?

YES NO

Is the Gallery Visits You Program being delivered during your organisation's normal business hours?

YES NO

Will there be a person in authority available during the Gallery Visits you Program?

YES NO

If your organisation does not have an Occupational Health & Safety Strategy/Policy in place, please agree to ensure following occurs for the Gallery Visits You Program:

Identify possible risks associated with the work; and ways these risks can be minimized

AGREE

Provide adequate supervision to ensure a safe work environment and safe work systems

AGREE



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INFORMATION ABOUT THE WORKSITE

Please briefly describe the work site (area where the Gallery Visits You program will be delivered) including audiovisual facilities and the expected audience for the Gallery Visits You program.

AUTHORISED BY

SIGNATURE	
TITLE	
DATE	
SIGNATURE	



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NGV OFFICE USE ONLY

NGV PROGRAM ADMINSTRATOR ASSESSMENT	
	I have assessed the information provided about the off-site work area for delivery of an Outreach Program, and determined that it is safe for this program to proceed.
	The following actions have been agreed with the Organisation, and will be implemented prior to the Outreach Program proceeding:
NAME	
SIGNATURE	
DATE	

NGV HEAD OF LEARNING APPROVAL	
	I have noted the remedial action and DO NOT APPROVE the program proceeding
	I have noted the remedial action, and APPROVE the program proceeding
NAME	
SIGNATURE	
DATE	