



SAFE@WORK

FIRST AID KIT REGISTER

This form may be used periodically to complete a stocktake of first aid kits at the University. Up to 2 kits can be registered on a single form if required.

Please complete this form and return to whs-admin@uow.edu.au.

KIT 1		
Kit Details		
Building:	Room/Location:	
Style: <input type="checkbox"/> Wall mounted <input type="checkbox"/> Portable	Kit Type: <input type="checkbox"/> High risk <input type="checkbox"/> Low risk <input type="checkbox"/> Remote/Field Work <input type="checkbox"/> Car	
Special Requirements/Kit Additions:		
Kit Inspections		
Last Inspection Date:	Expected Inspection Frequency: <input type="checkbox"/> 3 monthly <input type="checkbox"/> 6 monthly	
Access Requirements/Restrictions:		
Contact Details <i>(for liaison with Accidental First Aid for kit inspections)</i>		
Name:		
Room/Location:	Extension:	Mobile (if UOW issued):
Faculty/Division:	School/Unit:	

KIT 2		
Kit Details		
Building:	Room/Location:	
Style: <input type="checkbox"/> Wall mounted <input type="checkbox"/> Portable	Kit Type: <input type="checkbox"/> High risk <input type="checkbox"/> Low risk <input type="checkbox"/> Remote/Field Work <input type="checkbox"/> Car	
Special Requirements/Kit Additions:		
Kit Inspections		
Last Inspection Date:	Expected Inspection Frequency: <input type="checkbox"/> 3 monthly <input type="checkbox"/> 6 monthly	
Access Requirements/Restrictions:		
Contact Details <i>(for liaison with Accidental First Aid for kit inspections)</i>		
Name:		
Room/Location:	Extension:	Mobile (if UOW issued):
Faculty/Division:	School/Unit:	

WHS Unit Only	
Date First Aid Database updated: / /	Updated by: