# Risk Register Log

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| Persons Designated : | Date risk reported: |
| Date register completed: | Name of person reporting new risk:  Name or N/A |
| Document number XX/20XX  Number/Year | Send notification to Designated Individual immediately if risk score is above fifteen (15). |

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| Ref | Risk Ranking | Risk Rating | Immediate/ Corrective Action | Preventative Action | Completed by - Initials &  Date Completed |
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| Departmental head signature on review : |  |
| Date :  xx/xx/20xx |  |