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**Request for permission to bring visitors onto University premises**

This form is for use by students who wish to bring visitors onto University premises

for the purposes of taking part in a course activity, for example a film or photography shoot.

Please note that if any of your participants are under the age of 18, you will need to complete a separate permission form for these individuals.

*See* [*https://my.nua.ac.uk/Interact/Pages/Content/Document.aspx?id=2097*](https://my.nua.ac.uk/Interact/Pages/Content/Document.aspx?id=2097) *on the VLE for full details.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Your Request Details | | | | | | |
| Your Name |  | | Your Course | | |  |
| Visit Date/s |  | | Timing of visit/s | | |  |
| Location of visit (e.g. East Garth Photo Studio) | | | |  | | |
| Tell us about the reason for your request(e.g. My visitor/s 1-3 are modelling/acting for my shoot, Visitor 4 is a make-up artist) | | | |  | | |
| Your Visitors | | | | | | |
| How many visitors are you requesting come onto campus? | | | | |  | |
| Do any of your visitors have additional needs we should be aware of? (e.g., Require lift access) | | | | |  | |
| Visitor 1 | Name |  | | Contact number | |  |
| *Emergency Contact* | Name |  | | Contact number | |  |
| Visitor 2 | Name |  | | Contact number | |  |
| *Emergency Contact* | Name |  | | Contact number | |  |
| Visitor 3 | Name |  | | Contact number | |  |
| *Emergency Contact* | Name |  | | Contact number | |  |
| Visitor 4 | Name |  | | Contact number | |  |
| *Emergency Contact* | Name |  | | Contact number | |  |

|  |  |  |
| --- | --- | --- |
| **Declaration** | | |
| 1. I confirm that the visitor/s listed above are all over 18. 2. The visitor/s must remain under my supervision while on university premises. 3. I have undertaken any relevant health and safety induction & risk assessment for the planned activity. 4. Where audio, visual, or photographic recordings are taking place, I have agreed the content with the relevant parties, including the Course Leader, and obtained the necessary permission from those being recorded, filmed, or depicted in the images. 5. I will advise my visitors to attend the university reception at Francis House to sign in for all visits Monday – Friday commencing between 8.45am to 5.00pm. 6. I understand that this form is to facilitate visitors coming on site for course activities such as photographic and film shoots. These details are taken to enable us to meet our health and safety obligations to those visitors. As such, the form will be kept in a location accessible to multiple staff for this purpose. This location will be cleared of files regularly to ensure data is not stored unnecessarily. | | |
| **I (insert name here) agree to the above declaration.** | **Date** |  |

**PLEASE SUBMIT THIS FORM BY EMAIL TO** [**YOUR**](mailto:aro@nua.ac.uk) **COURSE LEADER OR NOMINATED MEMBER OF ACADEMIC STAFF AT LEAST 2 DAYS BEFORE YOUR PLANNED ACTIVITY. FORMS SHOULD BE SUBMITTED FROM YOUR UNIVERSITY EMAIL ACCOUNT.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Review and approval by Course Leader/Tutor** | | | | |
| I have reviewed the above request and, where required discussed with colleagues to ensure associated booking and scheduling has taken place.  I approve the individuals visiting university premises for the purposes detailed and confirm that: | | | | |
| 1. This request relates to a workshop booking, and the health and safety briefing will be carried out by a technical staff member. | | | |  |
| 1. This request relates to a course space, the student has arranged access via the relevant academic team, the booking is on Celcat, and I have arranged myself or an academic colleague to undertake the visitors briefing. | | | |  |
| 1. This request relates to an open space in the university (for example, a foyer or corridor) the student has agreement from estates to undertake the activity and I have arranged myself or an academic colleague to undertake the visitors briefing. | | | |  |
| **Signed** |  | **Date** |  | |
| **Print name** |  | | | |