**ARTS** **AND** **EVENTS APPROVAL**

Fill in **Part one** and email the form to b.trevelyan@shu.ac.uk (SHU Health and Safety Service)*.*

*Try and allow at least 2 weeks' notice, more if close to University holidays.*

Part One: what do you want to do and when and where do you want to do it?

|  |  |
| --- | --- |
| Title of your work or event |  |
| Your name(s) & contact details |  |
| Date of this application. |  | Date of event |  | finish date *if applicable* |  |
| Where exactly do you want to do your thing? |  |
| Has permission for the use of the space been agreed?  | YES | NO | *Person or department who said it's OK:* |
| *If you haven't got permission to use the space, try and do so before submitting this document.* |
| What do you want to do?*Include as much detail as possible (sketches etc are great) - use separate sheets if needed. If you don't give enough info, we'll only have to come back to you.* |
| Include the following information:-1. An outline of any significant hazards: *is there anything which could be dangerous, basically?*2. Drawings, plans, or photographs: *show us what you want to do. We need to understand it.* 3. Construction and dismantling: *drilling holes, glue or tape on walls, hanging stuff from the ceiling etc?* 4. Power or other electrical stuff? *again, this may be a problem so let us know.*5. Cleaning, maintenance and waste disposal requirements: *will you leave a mess? Who'll clean it up?*6. Security needs: *do you need a security presence, or access to normally inaccessible areas?* |
|  |

**Part Two: Approval**

*The following departments may need to give their approval in order for the planned event to take place.*

|  |  |  |
| --- | --- | --- |
| Department | Comments | Contact name |
| Health and Safety |  | Brian Trevelyan |
| Estates |  | Amanda Hughes |
| Facilities |  | Fiona Griffiths |
| Security |  | Dawn Meates |
| Sustainability |  | Katie Stead |
| Corporate Affairs |  | Tim Watkinson |
| FD Events |  | Andrew McGrath |
| Finance Insurance Services |  | Liz Windle |
| Faculty H&S representative(where approriate) |  |  |
| **Overall decision** |  |

*We'll get back to you with a decision ASAP*