

LOCATION REQUEST

I am a student/staff member of the Faculty of Arts and Social Sciences, University of Technology Sydney. I am seeking your cooperation in carrying out project work as part of my coursework/research/creative practice at the below site owned/leased/controlled by yourselves;

Student/staff name: _____ Student/staff number: _____

Subject number: _____ Subject name: _____

Academic supervisor name: _____

Site address: _____

Date/s: _____ Start/finish time: _____

Project synopsis: _____

Production details: _____

_____ Number of cast/crew: _____

Should you grant permission for use of the site for the purposes outlined above, the University's insurance policies cover the following contingencies, and the University or I will meet claims arising from these, subject to there being no negligence on your part:

- Accident or injury to the student or to their nominated unpaid individuals (whether or not these persons are students of the University) whilst on the site or travelling to/from the site;
- Accident or injury to third parties at the site arising from the student's or their nominated unpaid individuals' negligence (whether or not these persons are students of the University);
- Accidental damage to the site and to property thereon, arising from the student's or their nominated unpaid individuals' negligence (whether or not these persons are students of the University).

If you require any further information please contact the General Manager of the Faculty of Arts and Social Sciences on (02) 9514 3875. The University will not normally issue any further documentation regarding the use of the site.

Please provide your permission for use of the site detailed above in writing. To this end please sign and date the attached 'Location Agreement' form.

This page is to be retained for your records. Thank you in advance for your cooperation.

Student/staff signature



Location Agreement Form

This is an agreement between:	
Site Owner/Occupier/ Duly Authorised Person name:	
Site Owner/Occupier/ Duly Authorised Person address:	
and Student/Staff name:	

I, the Site Owner Occupier Duly Authorised Person (please tick), give permission for the above-named Student/Staff from the Faculty of Arts and Social Sciences of the University of Technology Sydney, to use the following site;

Name of site:	
Address of site:	
Access dates:	
Start/finish times:	

To carry out video/audio recording, photography or other project work as part of their coursework/ research requirements, as stated in the Location Request, on the dates and times listed above.

Signature of authorising person	Signature of witness
Authorising person's name and position <small>(if signing on behalf of a company, organization, government department or instrumentality)</small>	Witness name and address
Date	Date