

Student Name

Year of Study

Student ID

Contact Email

Production Name

Role on Production

Course Code

Assignment ID

Professor

Production Dates

Crew List

Cast List

**LOCATION REQUEST** - If you are requesting a location, please use this space to provide details. Include a map in your email if your location is in the City of North Bay or on a Canadore Campus.

The **City of North Bay** must be notified if you plan to shoot on City property - once completed, send this form to your assignment Professor and [filming@northbay.ca](mailto:filming@northbay.ca) *Requests to shoot on City property must be submitted 7 days prior to the shoot date.* Unsure of who owns the property? Find out first - ask your Professor how.

**Campus Security** must be notified if you are planning to shoot on campus indoors or outside [security@canadorecollege.ca](mailto:security@canadorecollege.ca)

For **Canadore Room Requests**, contact [Melissa.Smith@canadorecollege.ca](mailto:Melissa.Smith@canadorecollege.ca) with this completed form.

**RISK ASSESSMENT** - If your production includes any stunts, weapons, actors in police uniform, special equipment (hazer, jib, etc) or the use of *any* vehicles (including boats, bikes, etc) provide details below. Describe the scene and your safety plan and send to your Professor for approval *and* Kim Forsyth Health & Safety Coordinator. [kimberly.forsyth@canadorecollege.ca](mailto:kimberly.forsyth@canadorecollege.ca)

**THIS FORM MUST BE SUBMITTED AT LEAST 48 HOURS (2 School Days) PRIOR TO YOUR SHOOT DATE**

Security  
Approval  
Comments

Name

Professor  
Approval  
Comments

Name

I agree to follow safety regulations and precautions as communicated to me by Campus Security and my Professors.

Sign

Date