

Name:

Media Teacher:

Tutor Group:

Venue for filming:

Date of filming:

Time of departure from school:

Time of return to school (if applicable):

Hazard (risk)	Is the risk adequately controlled?	Further action required to control the risk.

***Be aware that conditions can change after you have made your risk assessment due to: the nature of the activity, the weather, the time of year, road works, building works etc. The risk assessment may need to change to take account of this and filming should be postponed if conditions change suddenly. Any material that you shoot that does not adhere to the department's Health and Safety Policy will be rejected and not be permitted to be used in your coursework!***

Signed by teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_