



Negotiated (beyond 7am-10pm) Building Access Approval for Learners

(and for limited access to workshops and areas where potentially hazardous processes may be undertaken)

For use with policy MP0363 Building Access, Key Distribution, After Hours Safety and Security

Learner name(s) and ID# (if applicable): _____

School/College/Service Area: _____

Mobile Phone No: _____ Home Phone No: _____

Home Address: _____

Reason for after-hours access request: _____

Period for after-hours access request: _____ to _____

Exact Location of after-hours work - room number(s) and building name(s): _____

What equipment will be used after hours? _____

Duration/Frequency of after-hours work (hours per day, days per week)? _____

Supervisor name/contact details: _____

I agree that:

- I have read and understand the Hazard Register for my work area
- I will only operate equipment that I have been trained to operate
- I have read, understood and will abide by *MP0488 Accident, Incident, Injury and Illness - Reporting and Rehabilitation*
- I will not allow non authorised people onto Otago Polytechnic site
- I will not block doors open or leave ground floor windows open and unattended
- When I leave Otago Polytechnic site I will ensure that facilities are locked and secure and that lights/equipment are turned off
- I will report an incidents/accidents or identified hazards promptly, and use the standard Otago Polytechnic procedures
- I understand many areas especially corridors and entry/exit points are under CCTV surveillance.

Additional for Workshop use:

- I will not operate equipment when I am tired/fatigued. I will ensure that I have had adequate rest and recovery, food and fluids.
- I have gained a licence to operate the specified machinery and equipment
- I will work only when another approved and licenced person is within calling distance i.e. same room
- I am a currently trained first aider

Requesting Learner Signature: _____ Date: _____

Authorising Formal Leader Signature: _____ Date: _____

Save a copy within the School/College/Service Area and forward a copy to Campus Services