



Use of Traditional Medicines LOCATION PERMIT

This form must be completed and forwarded to Safety, Health, Environment and Risk Management (SHERM) one week prior to a one-time event as per Policy 7.14 Indigenous Use of Traditional Medicines.

Ceremony Information			
Sponsoring Group/Event:			
Event Date:		Event Time:	
Supervisor Name:		Supervisor Title:	
Location of Ceremony			
Campus/ Location:			
Building:			
Room #(s):			
Designated Person(s) to Oversee the Smudging			
Name:		Title:	
Name:		Title:	
Name:		Title:	
Permit Submission			
Send completed form to SHERM:		Sherm, sherm@wlu.ca	
Location Approval			
I certify that I have approved the above location for the one-time burning of the sacred medicines.			
Name:		Title:	
X			

A Smudging Location Notification form will be forwarded to the sponsoring group supervisor, which must be posted on the door(s) during the event.