## STAGE AND SCREEN ARTS

# **EVENT SUBMISSION FORM INSTRUCTIONS**

## Page 1

#### **Requestor Information**

The name of the individual who is completing the submission form

The name of the student organization or class producing the event

The name of the Faculty who has approved the event concept and his/her role in relation to the event. Place a  $\checkmark$  on the appropriate line.

#### **Event Information**

Event title (title of play, movie, series etc.) A working title is fine.

Event type may be any format or combination of formats indicated by a ✓on applicable lines.

Place a starting and ending date in each of the production window columns. Consider all elements from auditions to editing.

Identify the target audience. Be aware of what has mass appeal and what may turn some off.

#### **Budget Information**

A line-item budget must accompany the event submission.

Enter the bottom line into the event budget line.

Evaluate available funds (i.e. Student Organization Funding) and complete the funding source lines and department request amount. NOTE: There is no guarantee of funding from the department.

### Page 2

#### **Facilities**

Place a  $\checkmark$  on each facility line beneath each production window for which you will be using it. The dates entered on Page 1 will be used to determine availability and to enter your reservation requests.

#### **Forms**

### **Facility Authorization**

An authorizing signature is required for some facility and property use. One or more persons may be named and authorized by the area manager. This completed form must accompany your submission before it can be approved.

### **Property Use Release**

To be used for authorized use of props, costumes/wardrobe, video equipment etc. Each area manager must sign off on an itemized property use release.

#### **Consumable Materials Agreement**

Your itemized budget must include consumable materials. The area manager will approve use of materials based on a reimbursement agreement. Unless you are purchasing everything you will need, this form must accompany your submission prior to approval.

## STAGE AND SCREEN ARTS

### **EVENT SUBMISSION FORM**

# REQUESTOR INFORMATION Name of person completing event submission form \_\_\_\_\_\_ Student Org. or Academic Department affiliation \_\_\_\_\_ Name of Faculty \_\_\_\_\_ Advisor \_\_\_\_\_\_ Director \_\_\_\_\_ Instructor \_\_\_\_\_ **EVENT INFORMATION** Event Title \_\_\_\_\_ **Event Type** Live Performance On Screen Presentation **Live Streaming** Production Post Production **Pre Production** Start date End date Intended Audience **College Students High School Students** Children Adults General Public All Ages Parental Guidance Adults Objectionable Language Theme Humor Nudity **BUDGET INFORMATION** Event Budget \$ \_\_\_\_\_ (line item budget must be attached) Requested Department funds Other funding source(s) \$ \_\_\_\_\_ Name of source \_\_\_\_\_

\$ \_\_\_\_\_ Name of source \_\_\_\_\_

## **Facilities**

Indicate ( $\checkmark$ ) which facilities your event requires during each of the three production windows

	Pre-Production	Production	PostProduction
B3 lab/costume shop*			
B5 men's dressing rm			
B8 women's dressing rm			
B9 editing rm			
B12 sound rm			
B18 lab/green rm			
B21 resource rm			
103 Blanche Davis Theatre			
107 Scene Shop*			
108 Sanford Syse Theatre			
111 lab/studio*			
112 classroom			
114 lab/control rm*			
119 classroom			
135 box office*			
201 Davis Booth*			
202 Syse Booth*			

<sup>\*</sup>indicates authorization required by area manager along with property use release and/or consumables agreement

Costume Shop Supervisor has authorized for use of the following:	
Sewing machines Irons/Steamers Laundry Dyes _	
All use of costume inventory will be requested and approved prior to alteration and use	
	Signature/Date Costume Shop Superviso
Scene Shop Supervisor has authorizedfor use of the following	_
Power tools Hand Tools Ladders/Scaffolding Paint	and Materials
	Signature/Date Scene Shop Superviso
Technical Director has authorized	
TEC Booth Lighting Sound Projection	
	Signature/Date Technical Director
Production Operations has authorizedto use studio equipment as follows	_
Still Camera Video Camera Studio Cameras Control Room Tech Lighting Package Sound Package	

Signature/Date Prod. Op. Manager

**Facility Authorization** 

# Stage And Screen Arts Property Use Release

# **Borrower Information**

Name:	e: Business:				
Email:		Phone:			
		Event Type:			
Instru	ctor:				
Start Date:		Return Date:			
TY	Item Description		Returned		
If re	questor is not the person who will be dir	rectly handling the property, please name tha	t person.		
		will be handling/operating the equipment.			
Signat	ure of Requestor				
	pproved by:				

Department Chair Signature

Area Manager Signature

# **Consumable Materials Agreement**

	Quantity Used	# Hours	\$/hour value	Replacement cost
Lamps				
Gels				
Batteries				
Paint				
Brushes				
Glue				
Lumber				
Nails/hardware				
Drill Bits				
Saw Blades				
Fabric				
Thread				
Dyes				