



Video Production Request Form

Requestor's Name: _____ JMU e-ID: _____

Phone: _____ College/Dept: _____ Date: ___/___/___

Description of video project (what do they want to get on video?): _____

Advantage of using video: _____

Resources Needed:

Space/Location: _____ # & Type of cameras: _____

Lighting Needs: _____ # & Type of mics: _____

Furniture Needs: _____ # & Type of staff: _____

What is the final destination of their video: Web DVD Other: _____

Will help be needed editing video? No Yes If yes, est. time to edit video: _____

Est. length of final video: _____ Est. time to completely shoot video: _____

Does CIT appear to have the resources to work on this project? No Yes

If yes, what dates and times are requested for shooting the video: _____

Criteria for Approval: Innovative use of video, number of students potentially served, necessity of video to teach the content, and the ability of resources to meet the demand.

___ Project APPROVED: Initial & Date: _____

Studio Reserved Online? _____ Date/Time for shoots: _____

Staff Scheduled? _____ Edit Suite Reserved Online? _____

___ Project REJECTED: Initial & Date: _____ Reasons: _____
