

**FRANKLIN HALL FILMING PROJECT NOTIFICATION FORM<sup>1</sup>**

**Student name:** \_\_\_\_\_

**Student email address:** \_\_\_\_\_

**Student phone number:** \_\_\_\_\_

**Space requested:** \_\_\_\_\_

**Filming start date & time:** \_\_\_\_\_

**Filming end date & time:** \_\_\_\_\_

**Title of project:** \_\_\_\_\_

**PLEASE CHECK ALL BOXES THAT APPLY:**

- ☐ This project will include the use of weapons, such as guns or knives *(Please work with instructor to get additional guidance re: use of weapons on campus. The Franklin Hall release form must be submitted with a document listing all precautions that you have put in place.)*
- ☐ This project will depict acts of violence, such as kidnapping *(Please work with instructor to get additional guidance re: use of weapons on campus. The Franklin Hall release form must be submitted with a document listing all precautions that you have put in place.)*
- ☐ This project will include recorded interviews *(No additional documentation required)*
- ☐ This project will require filmed auditions *(Please ensure you have obtained all necessary waivers)*

**INSTRUCTOR ACKNOWLEDGMENT & SIGNATURE APPROVING STUDENT PROJECT**

*The student submitted their project to me for review and I have approved their plan.*

**Instructor name:** \_\_\_\_\_

**Course number & title:** \_\_\_\_\_

**Instructor signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**STUDENT SIGNATURE & ACKNOWLEDGMENT**

*By signing below, the student acknowledges that all information provided above is true and accurate.*

**Student signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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<sup>1</sup> Updated March 2021