

Motion Picture/Television

Course Name and Number:			
Prod. #:		Production Title:	
Producer:		Director:	

WARDROBE REQUEST FORM

Producer:	Cell Phone:
Director:	Cell Phone:
Student year:: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	
Wardrobe Charge:	Position:
CWID#:	Phone:

Key Dates and times:

Date(s) Needed:
Shoot Dates:
Expected Date of Return (please allow one week for cleaning):

Brief description of wardrobe items:

Signatures:

Student Filmmaker:	_____	Date:	_____
Costume Collection Manager:	_____	Date:	_____
Art Dept. Faculty Mentor (if applicable):	_____	Date:	_____
Head of Production (required):	_____	Date:	_____

***Level of assistance provided by director's year in school:**

- 1st year director-----none
- 2nd year director: accessories, any unusual items not easily found (pregnancy/fat pads)
- 3rd year director: costumes & accessories for up to three main characters
- 4th year director: full cast unless there are a high number of extras

****Make appointments one week in advance. A large cast will require more lead time.**

- Bring research (pictures, etc.) with you. This will provide a better understanding of what is envisioned.
- Have accurate sizes or better yet your talent. One size does not fit all.
- Appointments are made through the Collection Manager, _____. Please make contact by E-mail @ _____. Only those with appointments will be assisted. Those without appointments will be turned away.

Keep in contact if there are any problems that arise.

*** Head of Production signature is required before release of costumes.