Request to Use Campus Facilities for Student Filming Clayton State University

Student Name(s):	
Laker ID Number(s) [if applicable]:	
Purpose:	
Please give a synopsis of film project:	
Location(s) – Campus Building/Interior/Exterior/Rooms:	
Dates and Times for Filming:	
Number of cast and crew members:	
Contact information: Name: Phone: Email: PLEASE NOTE: Once your request is approved, you will need to jonathanharris2@clayton.edu, to coordinate a supervisor for your request is approved.	to email Professor Harris, our production. All student filming requires a
Any use of the names, marks, logos, trademarks, or campus icons of requirements of the Board of Regents of the University System of G	f Clayton State University is governed by the
Clayton State University is the owner/custodian of buildings and grevalue. Requestors must offer written assurance that the Clayton State condition as they were prior to the filming.	ounds that have significant financial and aesthetic
Issues that will need to be addressed may include, but are not limited equipment in facility space; building access; vehicular/pedestrian to Note: Due to the significant student body on campus and the number filming is permitted with approval only.	traffic control; impact on Campus events. Please
Any damage to university facilities that occurs as a result of my production.	duction will be paid for or reimbursed by our
Signature:(Student Representative)	Date:
Signature: (CSU Representative)	Date:

Places fill out the form with us much detail as possible (attach additional meterials as possessary) and amail the	
Please fill out the form with us much detail as possible (attach additional materials as necessary) and email the completed form to Tommy Stein (thomasstein@clayton.edu) and he will respond to your request.	