



Application for the UC IRVINE STUDENT FILM AND PHOTOGRAPHY PERMIT

Project Name: _____

Student: _____ **Student ID #:** _____

Student Phone #: _____ **Student Email:** _____

Project Type:
 Film Photography Other
Describe: _____

Is this project a class requirement? Yes No

If not, what is the intent of this project? _____

Date(s) Requested:
Shoot Date(s) _____ Prep/Strike date(s) _____
Hours _____

Locations Requested: _____

FX (e.g., fire arms/weapons, stunts, or driving/traveling shots): _____

On Campus Parking Requirements: _____

of Cast & Crew: _____ **# Extras:** _____

I have read the Guidelines for Filming and Photography on the UC Irvine Campus and agree to comply with the Filmmaker's Code of Conduct. I understand that any substantive change in the above information requires resubmission of this application.

Student

Date