

# CCA-TV EXPANSION VIDEO

## Pre-Production Sheet

CCA-TV GROUP MEMBERS (Full Names): \_\_\_\_\_

DESCRIPTION OF VIDEO: \_\_\_\_\_

### PERSONNEL

*Must be approved at least 2 days before production date*

STUDENTS/STAFF INVOLVED (Full Names): \_\_\_\_\_

DATE(S) NEEDED: \_\_\_\_\_ SPECIFIC TIME: \_\_\_\_\_ APPROX. DURATION: \_\_\_\_\_

IMPACTED STAFF: \_\_\_\_\_

PRINT NAME

SIGNATURE

DATE

### LOCATION

*Must be approved at least 2 days before production date*

SPECIFIC LOCATION: \_\_\_\_\_

DATE(S) NEEDED: \_\_\_\_\_ SPECIFIC TIME: \_\_\_\_\_ APPROX. DURATION: \_\_\_\_\_

IMPACTED STAFF: \_\_\_\_\_

PRINT NAME

SIGNATURE

DATE

*If filming in Video/Film production studio: 1) Approval from instructor is required, 2) Please add dates/times to studio schedule (posted at studio entrance)-- you will need to coordinate with other teams filming in the studio space.*

### GREEN LIGHT

*Must be approved at least 2 days before production date*

EQUIPMENT NEEDED: \_\_\_\_\_

CCA-TV INSTRUCTOR APPROVAL: \_\_\_\_\_

SIGNATURE

DATE