UNIVERSITY of WISCONSIN Superior
Wisconsin's Leading Public Liberal Arts College

Technology Services
Media Production Request Form
1061 Swenson Hall 715-394-8300

Requested by: _____ **Phone:** _____ **Order taken by:** _____

Payment Method:

☐ **Campus Account:** _____ Name of Account: _____
(10 digit Account number is required)
Account Custodian: _____

☐ **Check or Cash** (upon pickup)

☐ **Bill to:** _____

Our Services are for University Related Projects Only

Date Requested: _____ **Date Needed:** _____ (specific date please not ASAP)

Copyright Status:
- ☐ Not Copyrighted
- ☐ Fair Use
- ☐ UW Copyright
- ☐ Permission Granted – document attached

Description of Project: _____
_____
_____
_____
_____

☐ **Graphic Project:**

- ☐ Color printing: ____8 ½ x 11 ____ 11x17
- ☐ Poster size: ____24" or ____42" wide by ____ long (ex: 24" wide by 36" long)
- ☐ Mount on ____Poster board ____Mat Board ____Foamcore. ____Color (b&w foamcore, others assorted), ____" Border (ex: ¼, ½, ¾, 1 inch)
- ☐ Laminate
- ☐ Comb Binding

- ☐ File(s) to print were brought on a CD or Flash drive
- ☐ File(s) to print will be sent in an email

☐ **Audio/Video Project:**

_____ # of originals _____ # of copies
Est. Audio/Video Length (Ex: 15 min. long): _____

- ☐ Copy Cassette tape to Cassette tape
- ☐ Copy from 8mm/Mini DV to DVD
- ☐ Copy from VHS to DVD
- ☐ Copy from CD/DVD to CD/DVD

- ☐ Start copying at tape's current spot
- ☐ Tape needs to be rewound

- ☐ Brought in CDs or DVDs

Cost of Materials and Services:

_____ @ $ _____ = $_____
_____ @ $ _____ = $_____
_____ @ $ _____ = $_____
_____ @ $ _____ = $_____
_____ @ $ _____ = $_____
Labor Charge - _____ Hours @ $ _____ = $_____
TOTAL: $_____

- ❑ Notified of Completion By: _____ Date: _____
- ❑ Paid in Full with cash or check # _____

Received by: _____

We want you to be satisfied with your project. If you have any questions or comments please call 394-8300