ADVANCED VIDEO PRODUCTION APPLICATION <u>NAME</u>: ______ ID#_____ GRADE YOU WILL BE IN NEXT SCHOOL YEAR: GLC: BRIEFLY DESCRIBE WHY YOU WANT TO BE IN ADVANCED DIGITAL VIDEO PRODUCTION: WHAT EXPERIENCE DO YOU HAVE IN VIDEO PRODUCTION? LIGHTING? CAMERA? EDITING? HAVE YOU EVER WORKED WITH A PROFESSIONAL EDITING PROGRAM? IF SO, WHICH ONES? PLEASE READ THE FOLLOWING AND SIGN BELOW: I understand that this is a zero period course and it does not conflict with my 2012-2013 schedule. I also understand that there will be times I need to film off campus after school, and extra hours past zero period.

Print Name:

Signature: _____ Date: _____