



**Student Filmmaking Program**  
**9-12 grade Application Form**

**Name** (first) \_\_\_\_\_ (last) \_\_\_\_\_

**Age** \_\_\_\_\_ **Grade** \_\_\_\_\_ **School** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Parents' Contact Information** \_\_\_\_\_  
\_\_\_\_\_

**Clubs, Extra Curricular Activities, Elective classes etc:** \_\_\_\_\_  
\_\_\_\_\_

**Artistic Interests:** \_\_\_\_\_  
\_\_\_\_\_

**Reasons for joining Workshop:** \_\_\_\_\_  
\_\_\_\_\_

**What area of filmmaking interests you most? (circle one)**

**Producer    Director    Scriptwriting    Camera**  
**Sound        Editing        Marketing/Distribution**

**Which approach to filmmaking interests you most? (circle one)**

**Documentary        Narrative (actors)        Commercials/Music Videos**

**List some stories/ideas/topics for the film YOU want to make (use back)** \_\_\_\_\_

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