

World Studies Media Center
Media Production Request Form

Name: _____

Phone: _____ Email: _____

Date Request Was Submitted: _____ Date Needed By: _____

* * * * *

Media Title: _____

Media to be streamed:

- VHS
 - Media Destination:
W:/Students/0Teachers/ _____
 - Whole Film Streamed? Yes / No
 - Film Clips Streamed?
 - Clip Start Time: _____ Clip End Time: _____
- DVD
 - Media Destination:
W:/Students/0Teachers/ _____
 - Subtitles? Yes / No
 - Whole Film Streamed? Yes / No
 - Film Clips Streamed?
 - Clip Start Time: _____ Clip End Time: _____

Media to be duplicated:

- DVD
 - Number of copies required: _____
 - Is this media copy-protected?* Yes / No

Media to be transferred / converted/ digitized:

- VHS to DVD
- MiniDV to DVD
- MiniDV to CD
- MiniDV to Computer Hard Drive:
 - Media Destination:
W:/Students/0Teachers/ _____
- Audio Cassette to MP3 File
 - Media Destination:
W:/Student/0Teachers/ _____
- Audio Cassette to Audio CD:
 - Number of Copies: _____
- Other/specify _____
 - Number of Copies: _____

Notified of Completion By: _____ Date: _____

Received by: _____

All media production requests will be processed in a timely manner. We want you to be satisfied with your project. If you have any questions or comments please call 804-828-2320.