

CANISIUS COLLEGE VIDEO INSTITUTE

STUDENT APPLICATION

Name: _____ Date: _____

Local Address: _____ Year in School: FR SO

JR SR

Local Phone: _____ Major: _____

E-mail Address: _____ Graduation Date (mo/yr): _____

I'm interested in the following Video Institute Activities:

_____ Becoming a Media Center Associate (paid position)
(Videotaping/post production of events on campus)

_____ Developing a service-oriented video (independent study credit)
(Working with Dr. Irwin and community service/humanitarian agencies)

_____ Becoming a member of the outreach team (paid position)
(Developing workshops/working with local high school students)

_____ Travel within U.S. to work on video projects

_____ Travel abroad to work on video projects

CCTV Involvement:

_____ I'm a member of CCTV
Explain involvement: _____

_____ I plan to become a member of CCTV

I've taken the following courses:

_____ COM 325 Media Literacy _____ DMA 387 Digital Video Production

_____ COM 361 TV Production _____ DMA 487 Adv. Digital Video Production

_____ COM 461 Adv. TV Production

(continue on reverse)

(reverse)

My production experience includes the following (please describe type of work, e.g. camera, audio, editing, etc.):

I've worked on these specific video/production projects (e.g., course projects, internship projects, independent projects): _____

_____ I have samples of my video work to show

_____ To date, I have no video production experience, but I'd like to learn

_____ I'm interested in attending a workshop to learn more about video production

***Please return this application to Dr. Barbara Irwin,
Director of the Canisius College Video Institute.
Communication Studies/Lyons Hall Rm. 321/email: irwin@canisius.edu***