APPENDIX IV

Application for Recording (Video, Photo and/or Audio)

This form is used when the applicant has not used Appendix II: Application for a Research Investigation

Name_____ Date_____

Affiliation_____ Phone_____ E-mail _____

1. Brief Description of Purpose: (a copy of the full proposal should be enclosed)

2. Is there any funding provided for the production/recording?
   No_____ Yes_____ Source_____
   Amt. for subject payment_____

3. Requested dates for recording at the Center_____
4. Description of planned activities:

5. Amount of time required per subject/group_____

6. Number of subjects needed_____ Characteristics of subjects (ages, gender, home language spoken, race, etc.)

7. Special requirements: (These include the kind of cooperation needed of a staff member, change of daily routine, need to leave Center, etc.)

8. Expected date of delivery of a review copy of the recording_____

Approved _____-Executive Director