



# Media Drop Off/Pick-Up Form

*Prior to dropping off media, please label each item and secure in a protective case or sleeve.*

Instructor Name (Print): \_\_\_\_\_

Course ALPHA: \_\_\_\_\_ Course Number: \_\_\_\_\_ Course Section: \_\_\_\_\_

Course Name: \_\_\_\_\_

Date Dropped Off: \_\_\_\_\_ Date Needed: \_\_\_\_\_

*Allow 2 weeks to process from date of drop off.*

<b>MEDIA NAME:</b> (List each title individually)	<b>MEDIA TYPE</b>
<b>COMMENTS:</b>	

**Pick-Up/Return Preference:**

- Please email the instructor for pick-up. Email: \_\_\_\_\_
- Please call the instructor for pick-up. Phone: \_\_\_\_\_
- Please return the media via inter-office/campus mail. Mail Stop: \_\_\_\_\_

**Multimedia Designer Release:**

The above videos have been processed and are ready to be picked-up.

Contact: emailed  called

Returned via inter-office/campus mail

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Pick-Up: \_\_\_\_\_

Signature for Pick-Up: \_\_\_\_\_

Signature

Printed Name