

Cert/BFA/MFA/PB installation and performance requests

Space repaired and cleaned Date:

This form is to be used for installations and performances in PAFA's school / public spaces, including but not limited to, Hamilton Lobby: all elevator lobbies: Lenfest Plaza: 11th Floor Student Lounge and terrace: all restrooms.

Submit completed form to Student Services at least 2 weeks prior to scheduled date. Name: Requested location: Scheduled From: _____ To: Use attached form to describe your project and what methods and materials you will use. I agree to the following Installation Regulations: 1. Submit a project proposal at least two weeks prior to the date the room is scheduled. The project must be approved by a faculty member; the Office of Student Services; the Director of Operations; the Director of Security. 2. You may not paint, nail and screw into the walls. 3. All studio policies and regulations (as described on page 28 of the PAFA Student Handbook) must be followed including no animals, plants, firearms, food, open flames and liquids that can damage walls or floors. The floors cannot be painted, drilled into or altered in any way but may be covered with approved materials. The performance / installation must not violate any of PAFA's school policies and regulations (as described on pages 40-47 of the PAFA Student Handbook) including alcohol use and smoking. 5. The working space, including the floor, must be restored to its' original condition at the termination of the project. The area will be inspected and further repairs may be required, please allow sufficient time to restore the area. Students may be charged a repair fee if area is not restored to its original condition. 6. The Academy cannot be responsible for damaged or stolen work or electronic equipment during a performance or installation. 7. Violations could result in the use of space being denied in the future or other disciplinary action. Student Signature: Date: Date: Faculty Representative: Dean of Student Affairs OR Director of Student Services: Date:_____ Director of Operations Date: Director of Security Date: For Office Use: Project approved: Date: