

NEW YORK FILM ACADEMY

COLLEGE OF VISUAL AND PERFORMING ARTS

FILMMAKING GREENLIGHT FORM

Student Name: _____

Program: _____ Section: _____

Choose One

MFA/AFA/BFA Intermediate Film MA/1yr Thesis Advanced Music Video MFA/AFA/BFA Thesis Film

Schedule Slot Dates for the project: _____

Logline: _____ Genre: _____

Greenlight Prep Notes: 2 Months Prior to the Shoot

Requesting for a 16mm or 35mm Camera

Yes

No

* This will depend on the availability of the camera. **If Yes, please get Equipment Manager to sign verifying request at least 2 months before the shoot slot.** They will let you know the dates when the camera is available. You will have to move the shoot dates according to the availability. You must insure the camera. The filmmaker must also provide for his/her own film stock, processing and developing costs.

Name: _____ Date: _____ Signature: _____

***Needs to be signed by the Equipment Manager**

1. Deadline for last Signature

Date: _____ Time: *by 4pm the latest M-F*

Write down the last day for the greenlight. This will be 2 business days before the checkout date.

Make sure to check the public holidays and weekend dates. If you are checking out on a weekend, you must get your signature on a weekday.

Student Signature: _____

2. Bursar's Department

Name: _____ Date: _____ Signature: _____

3. Registrar's Department

*Have you met the school's accuplacer requirements

Yes

No

If No, Notes _____

Name: _____ Date: _____ Signature: _____

Two Weeks Before the Shoot

Deadline Date:

4. Screenwriting Instructor's Signature ***Verification of Registrar's and Bursar's signatures on page 1

*Shoot script is locked and numbered
*Students can get this signature as soon as they have locked their script.

Name: _____ Date: _____ Signature:

5. Directing Instructor's Signature ***Verification of Registrar's and Bursar's signatures on page 1

- | | | | |
|----------------------------|--------------------------|---------------------------------|--|
| a. Shooting Script | <input type="checkbox"/> | g. Pre-Visualisation Materials | <input type="checkbox"/> |
| b. Shot List | <input type="checkbox"/> | 1. Cinematography Look Book | |
| c. Storyboards (Optional) | <input type="checkbox"/> | 2. Costume Look book | |
| d. Overheads | <input type="checkbox"/> | 3. Production Design Look Book | |
| e. Director's Statement | <input type="checkbox"/> | h. Are you doing stunts? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f. Director's Notes | <input type="checkbox"/> | i. Do you plan to cheat stunts? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1. Script notes | | 1. Storyboards -Not Optional | <input type="checkbox"/> |
| 2. Character descriptions. | | 2. Detail Descriptions | <input type="checkbox"/> |

Name: _____ Date: _____ Signature:

One Week Before the Shoot

Deadline Date:

6. Breakdowns

- a. Shooting Script
- b. Breakdown Sheets
- c. Day Out of Days
- d. Props & Wardrobe Breakdown

7. Cast

- a. Cast list with Contacts
- b. Cast Deal Memos
- c. Actor Release Forms
- d. Nudity Release Forms Yes No N/A

8. Detailed Budget

9. SAG (Email Confirmation)

- a. SAG Contract with Actors
- b. Workers Compensation Insurance

10. Crew

- a. Crew list with Contacts
- b. Crew Deal Memos
- c. Outside NYFA Crew / NYFA Alumni Crew List with Contacts, Resumes & References

11. Minors

- a. Minors' Actor Release Form
- b. Entertainment Work Permit Per Minor
- c. Studio Teacher ID Verified
- d. Workers Compensation Insurance

12. Locations

- a. Do you have Prop Weapons in the shoot? Yes No
- If yes, is it mentioned on your location permit? Yes

Dates	Location Address with Contact Number	Location Agreement Y/N	Location Permit Y/N	Location Insurance Y/N

13. Schedule

- a. Shooting Schedule (Strip Board)
- b. Shot List - per day and time duration for each shot
- c. Call Sheet for each day

14. Animals in the Film

- a. Email from Animal Humane Society
- b. Animal Wrangler
- c. Stunts with Animals (If Yes, Please fill out #15)

15. Only for Action Sequences or Special Circumstances

Using stunts in your Film requires special approval. You will need to follow several additional steps in order to be clearer to begin production. This section is to be filled out and completed before your Producing instructors signs your greenlight form. (Includes open flame, bodies of water, sports, underwater activity, driving, and other special circumstances)

- a. Stunt Description _____
- b. Storyboard: Please present all script pages, storyboards, shot lists, and proof of outside production insurance with worker's compensation for the action sequence before submitting this form
- c. Name of Actors Performing Stunts _____
- d. Number of Fight Scenes _____
- e. Rehearsal Hours _____
- f. Fight Choreography Yes No
- g. Prop Weapons Yes No
- h. Fall Yes No How High: _____
- i. Jump Yes No How High: _____
- j. Props and Stunts Mentioned on the Permit Yes No
- k. Stunt Coordinator Name _____
Stunt Coordinator Deal Memo _____
- Resume
- l. Workers Compensation Insurance
- m. Outside Production Insurance (Liability & Third Party Property Damage Coverage)

Please note that the stunt coordinator cannot be an instructor of the New York Film Academy. Your action sequence will not be cleared without securing an outside stunt coordinator and providing outside insurance with worker's compensation that will cover these shoot days.

Name: _____ Date: _____ Signature: _____

***Needs to be signed by the CEO, Director, or Director of Operations of the School**

16. Producing Instructor's Signature ***Instructor has verified Sections #6-14**

***Verification of Registrar's and Bursar's signatures on page

Name: _____ Date: _____ Signature: _____

Two Business Days Before the Checkout

Camera

Choose One

- Canon 5D
- RED Scarlet
- RED Epic Dragon*
- 16mm
- 35mm

**Only Available for MFA/BFA/AFA Thesis Checkouts*

Only for Epic Dragon / 16mm / 35mm AND if you are shooting outside 30 miles radius.

Returning Camera Nightly Yes (Please Fill out table on next page with times) No

If No, Insurance for Gear

Insurance Company Information
Name & Phone Number _____

Policy # _____

Name: _____ Date: _____ Signature: _____

***Needs to be signed by the CEO, Director, or Director of Operations of the School**

Please attach Insurance Certificate to your Greenlight Form

Equipment Greenlight

Time: 5:00pm Monday-Friday

Check Out Date: _____ Time: _____

Check In Date: _____ Time: _____

***Table for Pick-Up/Drop-Off Times of Camera**

Day 1 Date	Pick-up Time:
	Drop-off Time:
Day 2 Date	Pick-up Time:
	Drop-off Time:
Day 3 Date	Pick-up Time:
	Drop-off Time:
Day 4 Date	Pick-up Time:
	Drop-off Time:
Day 5 Date	Pick-up Time:
	Drop-off Time:
Day 6 Date	Pick-up Time:
	Drop-off Time:
Day 7 Date	Pick-up Time:
	Drop-off Time:
Day 8 Date	Pick-up Time:
	Drop-off Time:
Day 9 Date	Pick-up Time:
	Drop-off Time:
Day 10 Date	Pick-up Time:
	Drop-off Time:

Name: _____ Date: _____ Signature: _____

**Needs to be signed by the Equipment Manager*

Film Department Coordinator

***Scan your entire producing and directing binder, including all permits, location agreements, and insurance certificates, into a single PDF file and email it as an attachment to nan.siribunlue@nyfa.edu from your NYFA email address 2 business days before checkout. Greenlight signatures are by email appointment only after all materials are sent in and approved.**

Name: _____ Date: _____ Signature: _____

All documents have been verified and Student is cleared to Check Out

***Scan the completed Greenlight Form and email it to nan.siribunlue@nyfa.edu & laequipment@nyfa.edu from your NYFA email address**