

Pedestal Request Form

MUST BE SUBMITTED AT LEAST TWO WEEKS PRIOR TO INSTALLATION

ME & PRONOUNS:	LOCATION:	
ONE:	DATES REQUIRED:	
AIL:	DEPARTMENT:	
JDENT ID #:	FACULTY POINT PERSON:	
TE REQUESTED:	FACULTY EMAIL:	
PEDESTALS:		
pedestals/platforms/vitrines are white, rectangular		
QUANTITY ARTWORK SIZE HxLxW (IN	CHES) PEDESTAL SIZE H x L x W (INCHES)	
SHELVES:		
WHITE FLOATING SHELF three sizes, laminated white, cannot be painted	^{d.} 12" x 10"44" x 10"74" x 10'	
MISCELLANEOUS SHELVES please indicate size of work/preferred type of shelf	(i.e. sconce, picture ledge)	

Requests must be submitted two weeks prior to installation date. Pedestals will be dropped off in the gallery on the first day of installation by Exhibitions staff.

Please refer to our Pedestal Inventory when selecting pedestals. Your preferred pedestal may not be available; please provide the size of your artwork so we can find an alternative.

All pedestals are painted with flat 200 gallery white; you must repair any holes or marks you create. If you paint the pedestal, you must prime and repaint it back to its original white. Flat 200 paint is available for use from Exhibitions.



Equipment Request Form MUST BE SUBMITTED AT LEAST TWO WEEKS PRIOR TO INSTALLATION

NAME & PRONOUNS:	LOCATION:
PHONE:	DATES REQUIRED:
EMAIL:	DEPARTMENT:
STUDENT ID #:	FACULTY POINT PERSON:
DATE REQUESTED:	FACULTY EMAIL:
*Ple	ease refer to Exhibitions A/V Inventory *
MOUNT TYPE: CEILING P	PEDESTAL
	FILE TYPE: FILE SIZE: 4K:
FLATSCREEN: *all flatscreens come e	
QUANTITY: 22"	28" 40" 43" 48" 55"
NOTES:	
IPAD:	
QUANTITY: MODEL:_	MOUNT TYPE: WALL PEDESTAL (45°)
NOTES:	
IMAC:	
QUANTITY: SOFTWAR	RE/WIFI REQUIREMENTS:
NOTES:	
AUDIO: *flatscreens/projectors/ipads ha	
QUANTITY:HYPER IMMER	
DIRECTIONALWIRED HEADF	
NOTES:	
your work on/off during the exhibition. Witho	on.You must complete the attached instructions to ensure the Office of Exhibitions can tu out instructions, your specific work(s) will not be operational during the exhibition. Project I be charged late fees if equipment is not returned to Exhibitions by 4pm on de-install day
listed above until you return it directly to Exh	O IN THE GALLERY. By signing this form, you assume all responsibility for the equipment hibitions staff. I agree to accept liability for the equipment listed above. I understand that nce occur while the equipment is in my possession, I will be held financially responsible for the equipment.
IGNATURE & DATE:	
HEAV OUT INITIALS & DATE	CHECK-IN INITIALS & DATE:
IECK-OUT INITIALS & DATE:	CULCY-IN INITIAL 2 & DATE.

STUDENT

EXHIBITIONS

STUDENT

EXHIBITIONS