



The Director in the Classroom • Location Survey

Set Name: _____

Location: _____

Contact Person #1: _____

Phone #: _____

Phone #: _____

Contact Person #2: _____

Phone #: _____

Phone #: _____

Directions:

Parking:

Hours Available: _____

Washrooms: _____

Phone Location: _____

Equipment Access:

Location Lighting:

What kind of natural light exists?

Skylights _____ Windows _____

Doors _____ Candlelight _____

Mirrors _____

What kind of artificial lights:

Fluorescent _____ Tungsten _____

Halogen _____

Is power available at Location? _____

Outlets: 2 prong: ____ 3 prong ____

Is there enough light,
or do you need more?

Lighting Notes:

Location Camera

Is there room to work?

Is there room to move the camera?

Where will the camera be pointing?

Camera notes:

Location Sound:

Is it quiet or noisy?

Is there traffic? Music? Machinery?

Sound Notes:

*Use back of form for directions,
maps and floorplans.*