



VIEW 2008

Worldwide Competition for the Best Digital Short Video using
Special Effects and/or 3D Animation

ENTRY FORM

ABOUT THE AUTHORS / STUDENTS

First and Last name:

Phone:

Cell:

E-mail:

Address:

Zip Code:

City:

State:

Country:

INSTRUCTOR'S INFORMATION (FOR STUDENTS ONLY)

Instructor's name:

Phone:

Cell:

E-mail:

Address:

Zip Code:

City:

State:

Country:

SCHOOL INFORMATION (FOR STUDENTS ONLY)

<i>School name:</i>
<i>Phone:</i>
<i>Fax:</i>
<i>E-mail:</i>
<i>Department:</i>
<i>Address:</i>
<i>Zip Code:</i>
<i>City:</i>
<i>State:</i>
<i>Country:</i>

ORGANIZATION INFORMATION

<i>Organization name:</i>
<i>Phone:</i>
<i>Fax:</i>
<i>E-mail:</i>
<i>Address:</i>
<i>Zip Code:</i>
<i>City:</i>
<i>State:</i>
<i>Country:</i>

GRADE

___ *K-6 (elementary) or 7-12 (junior & senior high school)*

___ *College/university (including graduate studies)*

BRIEF CV *(5 lines max.)*

NAME(S) OF PROJECT DIRECTOR(S) OR MAIN TEACHER:

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ABOUT THE WORK

Title:

Duration:

Format:

Year of production:

Nationality:

BRIEF DESCRIPTION OF THE WORK (5 lines max.)

Total and unreserved acceptance of the rules and regulations

YES

NO

*Authorization to use personal data according to law
n. 675/96*

YES

NO

*I declare myself/the student(s) to be the author(s) or the
rightful owner(s) of the work*

YES

NO

AUTHOR/STUDENT SIGNATURE

DATE

**INSTRUCTOR'S SIGNATURE
(FOR STUDENTS ONLY)**

DATE

**ENCLOSE A LEGIBLE PHOTOCOPY OF THE SIGNATORY'S
IDENTITY CARD OR PASSPORT.**