

MP&E STUDENT PROJECT RECORDING AGREEMENT

DATE SUBMITTED ____/____/____

PRODUCER _____ INSTRUCTOR _____

COURSE# _____ PHONE# _____ BERKLEE EMAIL _____ MB# _____

ENGINEER* _____ INSTRUCTOR _____

COURSE# _____ PHONE# _____ BERKLEE EMAIL _____ MB# _____

MIX ENGINEER* _____ INSTRUCTOR _____

COURSE# _____ PHONE# _____ BERKLEE EMAIL _____ MB# _____

ASSISTANT* _____ INSTRUCTOR _____

COURSE# _____ PHONE# _____ BERKLEE EMAIL _____ MB# _____

I hereby authorize my phone number, sessions dates and session times to be published in order for students to contact me for sessions.

Producer _____
Signature

Engineer _____
Signature

Mix Engineer _____
Signature

Assistant _____
Signature

MP&E OFFICE USE ONLY SESSIONS BOOKED BOOKING DATE ____/____/____

| DATE | TIME | STUDIO | # OF HOURS | CHECKED BY |
|-------|-------|--------|------------|------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

***ATTENTION ENGINEERS/ASSISTANTS: You may only sign ONE RA prior to the posting of assignments. In the event that you sign more than one RA before assignments, you WILL be reassigned or lose one of the projects. Assignments CANNOT be changed.**

****Please be advised that a FORGERY OF ANY SIGNATURE on this form may result in expulsion from the MP&E Dept.**