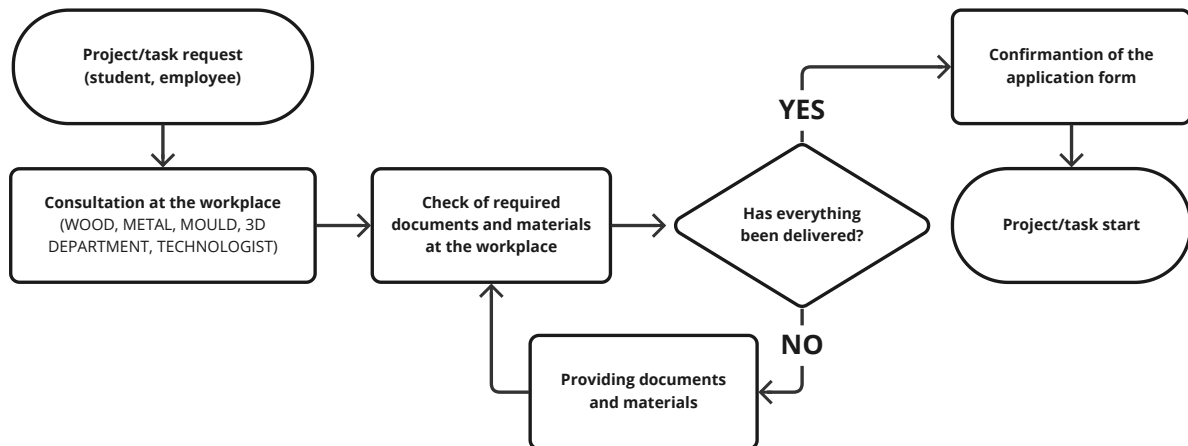


REQUEST FORM

TO WORK IN THE WORKSHOP (MAIN BUILDING)



| |
|-----------------------------|
| STUDIO/DEPARTMENT: |
| NAME AND SURENAME: |
| *PROJECT/TASK START DATE: |
| *ESTIMATED PRODUCTION TIME: |
| *REQUIRED COMPLETION DATE: |
| *PROJECT/TASK DESCRIPTION |
| |

**To be filled in by the workshop worker on the basis of the consultation*

The original of the application form will be kept by the workshop worker. The applicant is advised to take a copy of the application form (e.g. by mobile phone camera)

Date and signature of the studio/department head

Date and signature of the workshop worker