Visual Art Exhibition Request
Temporary Art Projects / Installations for non-gallery spaces

(MUST BE SUBMITTED WITHIN 60 DAYS OF PRELIMINARY PERMIT APPROVAL)

Requestor of proposed exhibit: Date:
(Name/Title/Organization or Department)

Exhibition title:

Location of proposed exhibit:

Date(s) and Time of proposed exhibit:

Specific proposal and content of exhibit: (Include general nature and character of exhibit, along with sketches, other visual or audio information, physical proportions, measurements, and space needed for project.)

Purpose of exhibit (artistic or otherwise):

Anticipated benefits to the University and its students: (Please include other desired effects of the exhibit.)

Consistency with University mission and identity:
Potential expenses or services required in executing the exhibit:

Participation of Public Safety:

Participation of Facilities Management:

Insurance requirements:

Legal / Liability concerns:

(Attach additional pages as necessary)

USD Requestor: ____________________________ Contact information: ____________________________
Supervisory approval: ____________________________ Date: ____________________________

Please submit form to University Design, Maher 274) mwhelan@sandiego.edu
(for internal review and comments below) Date received: ____________________________