



CASTING CALL NOTICE

Student Filmmaker:
Email:
Website/Social Links:
Year:
Title of Project:
Logline:

Shoot Dates:

PASTE
IMAGE/ART
HERE

DATES & DEADLINES

SELF-TAPE INFO :

AUDITION INFO:

DEADLINE INFO:

IF YOU DO NOT HEAR
BACK FROM US BY THE
CASTING DEADLINE,
WE APPRECIATE YOUR
TIME SPENT ON
SUBMISSION

Character:
Lead/Supporting:
Gender, Age:
Description:

Character:
Lead/Supporting:
Gender, Age:
Description:

Character:
Lead/Supporting:
Gender, Age:
Description:

Character:
Lead/Supporting:
Gender, Age:
Description:

Character:
Lead/Supporting:
Gender, Age:
Description:

FILMMAKERS: PLEASE EMAIL COMPLETED FORM TO SFTVSP0@LMU.EDU