

**YOUNG CRITICS JURY
STUDENT APPLICATION FORM**

please type or print clearly

**MILL VALLEY FILM FESTIVAL 32
OCTOBER 8 - 18, 2009**

The form below must be filled out completely by the applicant (age 13-18). A parent or guardian must fill out the accompanying consent form. The Teacher Recommendation form on page 5 may be submitted separately.

The applicant will be taught about media literacy and how to judge and critique a film during three all-day sessions over this summer (July 7-9, 2009). Five selected jury members will view all student films submitted to the special "youth category" of the MVFF and choose which films will be included in that section of the Festival (Jury sessions July 14, 15 and possibly July 16). We accept 15-25 students, but only five of those for the jury (with one alternate). Jury members are also chosen before the July 8-10 session from this application.

NAME

AGE

PARENT OR GUARDIAN

STREET ADDRESS

CITY/STATE/ZIP

HOME PHONE

ALTERNATE PHONE

PARENT EMAIL ADDRESS

APPLICANT'S SCHOOL GRADE

SCHOOL NAME

SCHOOL ADDRESS

SCHOOL CITY/STATE/ZIP

TEACHER'S NAME AND SCHOOL WHO IS FAMILIAR WITH APPLICANT'S WORK

One additional page may be attached if extra space is needed.
Please keep answers as concise as possible.

SECTION 1

Why do you think it is important to learn about film and video?

Do you have any experience working on a team project? If yes, describe:

How much television do you watch every day (number of hours on average) _____?
What do you watch? Why?

Write a review of your favorite movie in a minimum of 15 lines. Write as if you were reviewing the movie for your local newspaper or school paper.

How often do you see movies at a theater? (*select one*)

- Hardcore—I see 2-3 movies a week and eagerly await new releases.
- Steady—I see 1-2 movies a week and watch previews to spot new films
- Occasional—I see a movie once in a while if it really looks good

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SECTION 1 *(continued)*

Do you know what a documentary film is? If yes, describe it.

Tell us the name of a documentary you have seen and liked and very briefly what it is about.

SECTION 2

This section will tell us how much previous experience you have. Don't worry if you don't have any. It is not required. Past experience is less important than a willingness to learn.

Have you made your own movie? If yes, how did you do it? Did you use the family/school video camera? What was it about?

Have you written a script or short story? If yes, tell us about it in 2-3 sentences.

Have you done any acting? If yes, for what? A play? A Commercial? Tell us about it in 2-3 sentences.

**Return this application with the signed parent/
guardian consent form via mail or fax to:**

John Morrison
CFI Education
1001 Lootens Place, Suite 220
San Rafael, CA 94901

Fax: 415.383.8606

For more information call:
415.383.5256 ext. 113

STUDENT QUESTIONNAIRE

**YOUNG CRITICS JURY
PARENT/GUARDIAN CONSENT
AND TUITION FORM**

please type or print clearly

**MILL VALLEY FILM FESTIVAL 32
OCTOBER 8 - 18, 2009**

This form must be filled out completely and signed in pen before the accompanying student application is considered.

TRANSPORTATION *(please INITIAL, do not check. If both apply, please initial both.)*

I will be providing transportation to and from the program for the applicant every day _____

The applicant has my permission to take public transportation to and from the program every day _____

JURY AVAILABILITY

If invited, will the applicant be available to participate in all of the training sessions and jury sessions (COURSE: July 7-9, 10am-5pm; JURY: July 14-16, 10am-5pm)? Yes No

If no please explain. *Note: We may not accept applicants who cannot attend all sessions.*

EMERGENCY CONTACT

EMERGENCY CONTACT NAME

RELATIONSHIP TO APPLICANT

EMERGENCY CONTACT PHONE NUMBER

DAYTIME PHONE NUMBER

PARTICIPATION

I am a parent or guardian of an applicant in the Young Critics program, and that applicant and I agree to follow all of the program rules. I understand that failure to follow all of the program rules may result in the participant's dismissal from the program. I also agree and understand that I waive any and all rights that the participant may have in any film, video or other recording which may be made while the participant is involved in the program. I also agree and understand that I am signing this waiver transferring any and all to the California Film Institute and the Mill Valley Film Festival as a part of the participant's acceptance in the program. I know and understand the contents of this release.

APPLICANT'S NAME (PRINT)

SIGNATURE OF PARENT OR GUARDIAN (IN PEN)

NAME OF PARENT OR GUARDIAN (PRINT)

TUITION

The tuition for the Young Critics Jury is \$200. The fee will not be charged if the applicant is not invited or withdraws from the program upon invitation. *There are a limited number of full scholarships available. We encourage you to apply.*

I would like to apply for a tuition waiver / scholarship

Check or Money Order (checks made out to California Film Institute)

Visa Mastercard American Express

NUMBER

EXP. DATE

NAME AS IT APPEARS ON CARD

CARDHOLDER SIGNATURE

**YOUNG CRITICS JURY
TEACHER RECOMMENDATION FORM**

please type or print clearly

**MILL VALLEY FILM FESTIVAL 32
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This form is to be filled out by a current teacher of the applicant below or a teacher who has taught the applicant within one year of the date the form is received.

The student named below has applied to the Mill Valley Film Festival's Young Critics Jury educational program. The applicant will be taught about media literacy and how to judge and critique a film during three all-day sessions over this summer (July 7-9). Five jury members selected from this group will view all student films submitted to the special "youth category" of the MVFF and choose which films will be included in the Festival and curate the program (Jury sessions will be held July 14-16).

As part of the selection process we would like your feedback.

APPLICANT'S NAME

In what subject/discipline did you teach this student?

Do you think the applicant has the maturity and concentration to complete this program and sit on a jury? *The training sessions will be 6 hours a piece for three days, the jury will be two to three 6 hour sessions.*

Has the student done any projects for you that would prepare him/her for this program?
Please describe.

Would you:
 Highly Recommend Recommend Not Recommend this applicant (*select one*)

Thank you for your comments.

If returning the Teacher Recommendation form separately, please mail or fax to:

John Morrison
CFI Education
1001 Lootens Place, Suite 220
San Rafael, CA 94901

Fax: 415.383.8606

For more information call:
415.383.5256 ext. 113

Email: jmorrison@cafilm.org

TEACHER RECOMMENDATION