

# Print Request

**CREATIVE + PRINTING SERVICES**  
 218 S. Wabash Ave., Suite 917  
 P 312.344.7759 F 312.344.8070  
 colum.edu/cps

DATE TO VENDOR  PROJECT NUMBER

**C&PS cannot begin your job unless the following accompany this completed form:** final, approved text; hard copy and digital file of text; all photos; all logos; all photo credits and releases; all model releases.

**PROJECT NAME**

**SPECIAL INSTRUCTIONS**

**CLIENT NAME**  **DEPARTMENT**  **PHONE**

**PEOPLESOFT NUMBER**  **BUDGET**  **ESTIMATED POSTAGE**  **DEAN/ASSOCIATE/ASSISTANT DEAN/SUPERVISOR APPROVAL**

**DATE NEEDED**  **SPECIAL EVENT DEADLINE?**  **DESIGN ONLY**  **DESIGN AND PRINT**  **QUANTITY**

Do NOT write ASAP in the Date Needed section above. Creative & Printing Services will not accept this request.

**Checklist**

**PLEASE PROVIDE THESE ITEMS IF APPLICABLE**

FINAL COPY  LOGOS  PHOTOGRAPHY  PHOTOGRAPHER'S RELEASE/CREDITS

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**I have read this release, I understand it, and by signing below am agreeing to its terms.**  
**YOUR SIGNATURE**

**Delivery Instructions**

Please state the complete Department Name, Room Number and Building Address where you would like to have your order delivered.

**Request for PDF**  YES  NO **PDF Recipient's Email**  **Request for Web Site**  YES  NO **A Separate Web Design and Programming Form must be completed.**

**CREATIVE SERVICES ONLY**

**DATE RECEIVED**  **DESIGNER**  **VENDOR**  **DATE TO VENDOR**

**REQUEST ID #**  **FINAL COST**  **INVOICE #**  **PROJECT NOTES**