



## FSO PROFESSIONAL CONFIRMATION

\_\_\_\_\_ has informed me that you have agreed to  
*student name*

coordinate the use of fire/open flame on their student film. Thank you for

helping our students. Would you please confirm the following:

Your Name:

Phone:

Email:

Guild:

- That you have actually agreed to help the student.
- That you have read the script and understand the scenes being described.
- That you will be present on set during the filming of the open flame/fire.
- That as a professional, you will do everything you can to ensure that this/these scenes are performed safely.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If there is a problem, if the student fails to follow your advice, or if you have any questions contact me at:

573-289-8488 (cell)  
egermann@stephens.edu

Would you be interested in assisting other students and may we make your contact information available to our students for future sets?

YES      NO  
*Circle One*

Lizzie Germann  
Digital Filmmaking  
Stephens College