

Printshop Vandercook Press Personal Proposal Form

Name: _____ Phone#: _____

Email: _____

Circle One FR SO JR SR GRAD FAC STAFF Post Bac Jerome Other

Any MCAD student (enrolled in day classes) who wants access to the Vandercook press must fill out and sign this form. The Vandercook press can only be used with prior experience and with previous demonstration.

Please list any experience/classes you have involving the Vandercook press	Yes

I (print name) _____ full understand my access privileges and responsibilities and have a valid paid fee statement on file. I hereby agree to accept full responsibility for any loss or damage to the Vandercook press. If any part is lost, stolen or damaged (returned in a condition other than the condition which I received it) I will replace the item or pay for any repairs or clean up necessary.

Signature _____ Date _____

Press use OK: Yes No Yes, but conditional

Faculty/Staff Comments or Conditions:

Date Reviewed:

Initials: