

Graphic Design Request Form



GRAPHIC DESIGN REQUEST FORM

REQUESTER NAME		PHONE	
EMAIL		DEPARTMENT	
PRIORITY LEVEL		ORDER DATE & TIME	
DATE NEEDED		DATE DELIVERED	
WORK AUTHORIZED BY		DEPT TO BE BILLED	

TYPE(S) OF PRODUCTS REQUESTED (business cards, letterhead, print ad, etc.)

REQUEST DESCRIPTION

If requested piece is a new design, please be prepared to provide samples to illustrate your ideas.

SERVICE REQUIRED	ELEMENTS PROVIDED BY REQUESTING PARTY
WRITING AND/OR EDITING <input type="checkbox"/>	TEXT/COPY <input type="checkbox"/>
GRAPHIC/WEB DESIGN <input type="checkbox"/>	GRAPHIC ELEMENTS <input type="checkbox"/>
PHOTOGRAPHY <input type="checkbox"/>	PHOTOGRAPHY <input type="checkbox"/>
ILLUSTRATION <input type="checkbox"/>	REFERENCE MATERIAL/SAMPLES <input type="checkbox"/>

PURPOSE OF PIECE	
TARGET AUDIENCE	

EXISTING PHOTOGRAPHY AVAILABLE? YES <input type="checkbox"/> NO <input type="checkbox"/> I DON'T KNOW <input type="checkbox"/>	IS THERE A BUDGET FOR THIS JOB? NO <input type="checkbox"/> YES <input type="checkbox"/> IF YES, HOW MUCH? <input type="text"/>
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TIMELINE

DATE	DELIVERABLE	DATE	DELIVERABLE

ADDITIONAL NOTES	
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