Please fill out the form. Media/interview requests must be submitted at least five working days in advance.

Your Name: ___________________________ Telephone: _____________________________ E-mail: _____________________________

Media Source:

- **External Media** (Non-USC/Television, Newspaper, Radio, etc.)
  
  Name of Company: __________________________________________

- **Internal Media** (Check One)
  
  __ Daily Trojan  __ Neon Tommy  __ KSCR  __ Annenberg  __ Other: __________________________

  Dept./Publication/Class: __________________________

  Supervisor/Instructor: __________________________

Type of Interview (circle one): In-Person/Phone

Staff Member You Are Requesting Interview With: __________________________________________

Topic/Expertise needed: __________________________________________

**FILMING IS NOT AUTHORIZED UNDER ANY CIRCUMSTANCE.**

Filming is defined as any type of recording of images, whether it is done on film, video tape, audio or electronically, for reproduction.

Additional Information:

- No interviews may occur without the advance approval, from the appointed representative, of the Engemann Student Health Center. The representative must be notified no later than five (5) working days before the interview is to take place.
- Interviews may extend no longer than thirty (30) minutes in length from the time of the scheduled interview start.
- All media requests should be directed to Heidi Ried-Gonzaga, Director of Marketing at the Engemann Student Health Center. (riedgonz@usc.edu)

I have read and understand the above policies, requirements and restrictions at the USC Engemann Student Health Center and I agree to adhere to each.

Your Signature: ___________________________ Date: ___________________________

Signature of Engemann Executive Director/Media Rep.: ___________________________ Date: ___________________________

For internal use only:

Interview Date: _____/_____/_______ Time: ____________am/pm Location: __________________________

Message Received by: ___________________________ Referred to: ___________________________ Date: ________ Time: ___________