



TEXAS TECH UNIVERSITY SYSTEM
Office of System Relations™

Photographer Request

Project: _____

Requesting Organization/Department: _____

Point of Contact: _____

Phone: _____

Email: _____

Project Completion Date: _____

Project/Event Description: _____

Date of Requested Service: _____

Potential Number of Hours: _____

Is Travel Required Yes or No

If so, potential number of hours: _____

Please send all requests to Julie Doss for approval at julie.doss@ttu.edu.

Internal requests only