



## 2025 Somerset County Teen Arts Festival

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# FILM GUIDELINES & SUBMISSION FORM

**Submission forms, student work, and release forms due on or before April 1st, 2025**

## FILM GUIDELINES

### ALL GROUPS

Maximum of 10 minutes per video

Maximum of 5 films per school

- Students may submit a film individually or as a group and will be adjudicated per film.
- Student release forms are required from all students participating in the film.
- All films must be submitted as separate video files and may be delivered as unlisted YouTube video links, on a flash drive, or through free online services such as WeTransfer. If sharing files through Google Drive, please allow access to anyone with the link and share the link via email.
- Films will be reviewed by the adjudicator in full prior to the festival. On the festival day, students will have the opportunity to meet with the adjudicator in-person to discuss their film.
- When naming digital files or YouTube videos, please use this format:  
Name of School\_Film\_Name of Student and/or Student Group\_Title of Film.
- Email submissions to Commission Staff at [CulturalHeritage@co.somerset.nj.us](mailto:CulturalHeritage@co.somerset.nj.us). Mail or drop off flash drives to: Somerset County Cultural & Heritage Commission, PO Box 3000, 20 Grove Street, Somerville, NJ 08876. Label flash drives with SchoolName\_Film\_TeenArtsFestival2025.
- Please contact Commission Staff at [CulturalHeritage@co.somerset.nj.us](mailto:CulturalHeritage@co.somerset.nj.us) if you have any questions, concerns, or have trouble submitting your form.

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FILM SUBMISSION FORM

- Schools are limited to up to FIVE (5) film submissions.
One form for each allowed film has been provided. Fill out only ONE form per film entry.

FILM SUBMISSION 1 of 5
School:
Coordinator Name:
Coordinator Email:
Group Name for THIS Film:
Title of THIS Film:
Length of THIS Film (10 min max):
Number of students participating in THIS Film:
Name, age, and grades of each group member (e.g.: John Smith, 14, Grade 8; etc.):
Film Teacher Name:
Film Teacher E-mail: Film Teacher Phone:
Is this film available to be nominated for the State Teen Arts Festival? Yes [ ] No [ ]

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FILM SUBMISSION 2 of 5
School:
Coordinator Name:
Coordinator Email:
Group Name for THIS Film:
Title of THIS Film:
Length of THIS Film (10 min max):
Number of students participating in THIS Film:
Name, age, and grades of each group member (e.g.: John Smith, 14, Grade 8; etc.):
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Coordinator Email:
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