



# HCTV PROGRAM APPLICATION

Date: \_\_\_/\_\_\_/\_\_\_

Program Title: \_\_\_\_\_

Producer Name: \_\_\_\_\_ e-mail: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Format:

- Host Interviews Subjects   
  Panel discussion with Moderator   
  Interview with video inserts  
 Interview on Location   
  Location Action/Story   
  Other \_\_\_\_\_

Program Length (approximate): \_\_\_\_\_ Target audience? \_\_\_\_\_

Brief Description of Program:

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Please attach any outlines, storyboard sketches, press releases or other information about your program.

I plan to produce this show:    Once    Weekly    Monthly    Quarterly    Other: \_\_\_\_\_

This program will be produced independent of HCTV. I will provide ready-to-air copies to the station in the following format:

- DVD   
  SVHS   
  VHS

I will need to borrow HCTV resources. (i.e. equipment, studio, editing system)

Do you have a crew for this project?    Yes    No

Do you need help finding crew members?

Camera 1    Camera 2    Camera 3    Director

Audio    Editor    Talent    Floor Manager

Desired Location of Shoot:

Town Hall Studio    Council Chambers

Remote Location: \_\_\_\_\_

Describe any other requirements or questions you may have concerning this production:

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(Please Print Clearly!)

Send Completed Application To: HCTV Corp. P.O. Box 707, Herndon, VA 20170-0707