

PCTV Program Submission (Submit ONE sheet per show)

ALL information must be completed in order to process

Producer:		Phone:		Email:	
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Program Creation date		Program Submission date (date actually turned in)		Runtime	Staff initials
Exact Filename [Save file and submission form using same name]	File naming format: ProgramTitle_Topic_SubmissionDate (no characters " ! ,) # (+ etc)				

Program Title:				
Installment Topic:				
Brief Description <i>What's show about?</i>				
Program Content:	Does this contain adult material? No Yes (disclaimer required at start of program)			
Not appropriate for children - Select all that apply:	Adult Language		Adult Situations	
	Time sensitive material? Outdated after:			
	Have you obtained all necessary rights & permissions to use any copyrighted material?			
TV Guide Rating:				
Series Program (For Producers with Regular timeslot only)	Bi-weekly	Monthly		
Non-series Program Distribution	How many times would you like this program to air? (# of times may be altered to fit programming needs)			
	2x	4x	8x	Not Applicable
Special Notes				

Program Categories Select only two 1 - Primary 2 - Secondary	Arts Film & Culture	Music/Entertainment	Youth	Short Form Fillers (under 15 min)
	Community	News Issues Public Affairs	Late Night-Adult Disclaimer Required	PSA
	Gen Int/ Talk Show	Religious/Spiritual		Program Promo
	Health/Lifestyle	Sports/Recreation		Information piece

ID: #					Staff Use Only		
Start Trim:		Submission Format	Program Delayed?	Reason	Notes:		
End Trim:		Tricaster/Studio					
Length:		Stream					
		File download source:					