



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:

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 ☐ USB Flash Drive
☐ Digital Download

☐ 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:

(Please Print Clearly!)

Send Completed Application To: HCTV Corp. 730 Elden Street, Herndon, VA 20170