



PROGRAM PROPOSAL FORM

To submit a program for consideration, please complete both this **Program Proposal Form** and the **Submission Release Form**.

Mail forms to:

**New Hampshire Public Television
Program Proposal Submissions
268 Mast Road, Durham, NH 03824**

This proposal will be submitted to NHPTV's Independent Production Review Committee. The committee meets quarterly, and will provide you with a response within 90 days of review. Please include a VHS or DVD copy of your project with this application.

Name: _____

Title: _____

Organization / Company Street Address: _____

City / County / State / Zip: _____

Daytime Telephone: Evening Telephone: _____

Fax Number: _____ E-mail Address: _____

Web Address: _____

PROJECT INFORMATION

These questions will help us understand your program idea.

1. Project Type and Program Title:
2. Brief Description (2-3 sentences):

3. What type of association with NHPTV would you like?
 - Co-Production
 - NHPTV Production
 - Presenting station to PBS, APT, or other national distributor

4. Describe how you see NHPTV working with you on this project. What contribution do you expect from NHPTV and what contribution do you expect to make? Be as specific as you can with regard to raising funds, production, distribution, etc.

5. Intended Audience (i.e, age, gender, education, socioeconomic level, and ethnicity):

6. Why would your intended audience want to watch your program?

7. What is the program's purpose? (to educate, inform, enlighten, entertain, etc.):

8. Do you have plans for a website?
 - Yes
 - No
 - Don't Know

9. Do you have community outreach plans? (public screenings, workshops, forums, etc.)
 - Yes
 - No
 - Don't Know

10. What is the potential for outreach or ancillary products beyond broadcast? Describe educational materials, community engagement plans, website extension possibilities, digital television applications as well as plans for video sales or secondary distribution potential.

NHPTV'S MISSION

New Hampshire Public Television's mission is to engage minds, connect communities, and celebrate New Hampshire with programs that entertain, educate and enrich.

How will your program address this mission?

CLOSED CAPTIONING

All English language programming prepared or formatted for display on analog television and first shown on or after January 1, 1998, as well as programming prepared or formatted for display on digital television that was first published or exhibited after July 1, 2002 ("digital programming"), is considered "New Programming" and must be captioned according to benchmarks set by the FCC.

Is your program closed-captioned?

- Yes
- No

Do you have plans to close-caption your program?

- Yes
- No
- Don't Know

PROGRAMMING

These questions will help us determine where your program fits in our broadcast schedule.

Program Length:

- 26:46 (30-minute program)
- 56:46 (60-minute program)
- 1:26:46 (90-minute program)
- 1:56:46 (2-hour program)

Special or Series:

- One-Time-Only Special
- Daily Series
- Weekly Series
- On-going
- Limited
- Number of episodes:

What is the format of your program?

- 4x3
- 16x9

What is your program's master media format?

- Mini DVD
- DVCPro
- Beta
- HD
- Other _____

Program Type (documentary, children's, public affairs, etc.):

Program Distribution: (check all that apply)

This program or series is intended for:

- Local broadcast
- Statewide broadcast
- National broadcast
- Educational video
- Home video

Is your program completed?

- Yes
- No

Producer's production background and relevant experience:

Have you produced programs for NHPTV in the past?

- Yes
- No

If yes, please list projects you've produced for NHPTV.

Have you produced public television programs for local, statewide or national broadcast?

- Yes
- No

If yes, please list programs you've produced for other public television organizations.

Have you produced programs for local, statewide or national distribution outside of public television?

- Yes
- No

If yes, please list the programs you've produced.

Other relevant producing and/or production experience:

FUNDRAISING

This information will help determine your budgetary needs.

Why would funders want to fund your program?

Total Project Budget: \$ _____

Funds already received: \$ _____

Total spent to date: \$ _____

Funds needed to complete project: \$ _____

List funds secured from foundation grants, corporate underwriting, producer contributions, etc. Please list sources, amounts and years received, including producer's cash contributions.

Pending funds:

List any foundations, corporations or individuals that you have identified as potential underwriters for your project.

Please note: Before NHPTV can begin fundraising activities on a project that has been accepted by NHPTV, producers must consult with a NHPTV Development Department staff member to discuss solicitation guidelines and underwriting requirements.