



Program Proposal Form

Contact Information

Name : _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Fax: _____ E-mail: _____

Basic Information

Name of Show: _____

One-Line Description/Tag: _____

Intended Program Segment:

- | | |
|---|---|
| <input type="checkbox"/> Local Variety | <input type="checkbox"/> Community Calendar |
| <input type="checkbox"/> Arts Calendar | <input type="checkbox"/> Local News |
| <input type="checkbox"/> My Music Hour | <input type="checkbox"/> Non-English |
| <input type="checkbox"/> Community Calendar | <input type="checkbox"/> Other |
| <input type="checkbox"/> Municipal Meetings | |

Briefly state how your proposed show fills the program segment you checked above:

Show Details

Production Details

Include: Frequency of production, when and where production will take place, production resources needed, info on talent, program submission timetable.

Statement of Compliance

Statement of Compliance: Applicant has read and is thoroughly familiar with the Rules & Procedures for use of the Community Access Center, all of which are incorporated herein and made a part hereof.

Applicant is thoroughly familiar with the contents of the program material to be shown and states that consistent with the Rules Governing Use of Access Channels and in compliance with FCC Broadcast Standards:

- Neither a lottery nor lottery information will be broadcast
- No advertising material designed to promote the sale of commercial products or services will be broadcast;
- All appropriate arrangements and clearances have been obtained from

broadcast stations, networks, sponsors, music licensing organizations, performers' representatives and without limitation by the above any and all persons (natural and otherwise) as may be necessary for authorization to transmit the program materials;

The program materials do not contain obscene material, as determined in a court of competent jurisdiction;

The program materials do not contain slanderous or libelous materials.

Applicant understand that violation of any of the above may result in imposition of civil (and in some cases criminal) liability.

Applicant's
Signature: _____ Date: _____

<p><i>For Office Use Only:</i></p> <p><input type="checkbox"/> Copy of ID on File</p> <p><input type="checkbox"/> Proof of Residency Confirmed</p>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> <p><i>Scheduled Timeslot:</i></p> <p>_____</p> </div>
<p>Date Proposal Received: _____ Staff Initials: _____</p>	
<p>Date Proposal Reviewed: _____</p>	
<p><input type="checkbox"/> Accepted <input type="checkbox"/> Rejected</p>	