Program Plan Form

Member #_________________ Series: yes or no
Name___________________ Religious Access (14)______
Estimated Length:_____________ Public Access (15)______
Date:____________________
Project Title:____________________

Estimated Completion Time: __2 months    __4 months    __6 months    __On-going series (must still have the first episode turned in within 2 months)

What is your program idea/story idea?____________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

What is the purpose of the program?  to entertain    to inform

Do you plan to use music, if so what kind? Copyright free    local musician(with permission)    obtain copyrights

Do you plan to use interviews, narration, or graphics to help tell the story?____________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

What do you think some of your challenges may be in completing this project?__________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

How can Access Staff be most helpful to you (consultation with planning, technical training, finding volunteers)?
____________________________________________________________________________________________
____________________________________________________________________________________________

Do you have or need volunteers to help?____________________________________________________________
____________________________________________________________________________________________

Signature:_________________________________________ Date:__________________