

PUBLIC ACCESS NORTHERN DUTCHESS AREA, INC. (PANDA)

SINGLE PROGRAM SCHEDULING REQUEST

Adopted March 21, 2000

Use this form if you wish to schedule time for a single program or "special". **Submit this request with your videotape, together with a signed Program Agreement.** PANDA channel(s) are available for non-commercial programming, only. PANDA will contact you by telephone within two weeks giving you the time(s), date(s) and channel(s) scheduled for your program. If you wish to schedule a Series Program – i.e., weekly, every other week, or once a month – please use a "Series Program Scheduling Request" form.

Personal Information (Please print legibly) (The name and address of any person requesting time on the access channel(s) are open to public inspection.)

First Name: _____ Last Name: _____

Residence Address (no P.O. boxes): _____

City: _____ State: _____ Zip Code _____

Daytime Telephone: () _____ Evening Telephone: () _____

Are you 18 years of age or older? yes no

If you are under 18, a guardian is required to sign the Program Agreement.

Mailing address if different from above: _____

Program Information (Please print legibly)

Program Title: _____

Program length in minutes and seconds: _____

Program Description (for publication): _____

Program Information. Cont'd

Program will be (check one): on VHS or SVHS videotape live

If live, where will the program originate? **(Producer must be certified to use PANDA studios for program to originate from PANDA):** _____

This program is produced by me another individual or organization

If this program is produced by someone other than you, please print the name and address of the program's producer: _____

Does this program require a disclaimer under PANDA's Program Policies for adult, violent, and/or medically graphic programming? yes no

Program Category (circle one)

- | | | |
|---------------------------|-----------------------|--------------------------------------|
| AIDS Issues | Education/Information | PSA [®] /Promo [®] |
| African/African-American | Environmental | Psychic/Tarot/Astrology |
| Animals/Pets | Erotica/Adult | Religion |
| Arts | Experimental | Science Fiction |
| Asian/Asian- American | Fashion | Self Help |
| Books/Poetry | Finance/Business | Seniors |
| Children's Programming | Film/Media | Spanish Speaking/Latino |
| Comic Books/Animation | Gay & Lesbian | Sports/Outdoors |
| Community Concerns | Health | Talk Show |
| Cooking | Jewish | Theater |
| Computers/Applied Science | Music | Travel |
| Comedy | Music Videos | |
| Cultural/Ethnic | | |
| Drama | Public Affairs | Women's Issues |
| | Political/Advocacy | |

Does this Program contain fifty-percent (50%) or more of material other than you (i.e. music videos, film/TV clips, archive material)? yes no

Optional Contact Information

This information will be offered to inquiring viewers by PANDA staff. Please note that it will be given to anyone requesting it.

Contact Person: _____

Address or Post Office Box: _____

Telephone: _____

E-mail and/or website address: _____

Signature (required): _____ Date: _____

This Single Program Scheduling Request must be accompanied by a **signed Program Agreement**, together with your videotape.

This Single Program application will not be processed if:

- You did not sign this request form.
- You did not fill this request form out completely.
- You did not sign a **PANDA Program Agreement** and submit it with this request.
- You did not submit your videotape with this request.

Please be certain that the above steps are completed before submitting your application.

If this request is submitted on behalf of an organization, it must be accompanied by a letter from the chief operating officer of the organization and submitted on organization letterhead. The letter should indicate who, within the organization, will serve as the contact person for this program.