
Contact Information

*Organization: _____
Address: _____
City, State, Zip: _____
*Contact Person: _____
Telephone: _____
*E-mail: _____

Project Questionnaire. The following questions are designed to help you begin thinking about the project you wish to create. Please make your answers complete as possible.

WHAT is the main objective of this project? Describe the purpose of the video.

HOW will this program be used? WHO are we trying to reach?

WHY is this service/information important? Explain the viewer benefits.

WHERE will this project be filmed? What type of locations are needed?

WHAT will be the format of the project?(Ex. Talk show, testimonial, training video, etc.)

_____ Expected length? _____ (min:sec)

WHEN are realistic deadlines?

Concept _____ Script _____ Shoot _____ Edit _____ Airdate _____

ARE there any pre-existing materials with information for the scriptwriter? If so, please attach these materials to your request.

Additional Comments and/or Information

*Signature: _____ Date: _____

QUESTIONS or COMMENTS can be directed to: Keith Kingslien, Sr. Producer TV26

(360) 419-3233 | (360) 305-1118 | keithk@mountvernonwa.gov

(*required)