



UCTV Program Edit/Submission Form

Please fill out this form for each program that requires editing services from UCTV

Submitted by: _____ Date: _____
Phone: _____ Email: _____

Opening Credits:

Presenting Organization:			
Series Titles:			
Program Title:			
Campus:		Date of Lecture:	

Speakers:

FIRST NAME	LAST NAME	PROFESSIONAL TITLE	AFFILIATION

End Credits:

Sponsor:	
Special Thanks to:	
Production Credits: (producer, camera, audio, etc.)	
Website:	

Length of Program:	30	60	90	120	other	Trt:
Logo/artwork available?					Contact:	

Category:

<input type="checkbox"/> Public Affairs	<input type="checkbox"/> Art	<input type="checkbox"/> Business	<input type="checkbox"/> Law
<input type="checkbox"/> Humanities	<input type="checkbox"/> Theater/Dance	<input type="checkbox"/> Science	<input type="checkbox"/> Education
<input type="checkbox"/> Music	<input type="checkbox"/> Health	<input type="checkbox"/> Agriculture	<input type="checkbox"/> other_____

Tape Purchase Information:

	NAME	PHONE NUMBER
Contact to purchase tape:		
Make copies available through UCTV?	Yes	No
Video-on-Demand on UCTV website?	Yes	No

Description / Synopsis of Program

Please note if content is for adult audience

***Producer is responsible for securing all rights for broadcast of the program.