

PROGRAM OUTLINE

PROJECT (program name/working title):		Production Start Date
ACMI Member/Producer		Projected Completion Date
Email	1st phone / type 2nd phone / type	Timeline
Organization /Agency		Program Duration
Description of Program		Format / Series / Special
Target Audience		Projected Air Date(s) Subject to channel time availability
Location: ACMI Studio, ACMi Studio and or On Location		Permissions Needed: Music, Location, Other
Crew Needed / Positions / ACMi Members, Certifications		Talent Releases Needed / Completed
Equipment Needed		Music or Location Permissions Needed / Completed
Workshops Needed		
NOTES:		'
Project Number Producer ID	(/	ACMi Code) assigned with ACMi Staff approval
Mandatory Pre-production Meeting	with DATE	ACMi Staff