

Staff Initials _____
Date Received _____
Program w/ form Yes No



Series Request for 2020 Season

(At least three episodes must be submitted to be eligible for a new series timeslot.)

1) Today's Date: ___/___/___

2) Project Title: _____ 3) Project #: _____

Episode title must be provided with each submitted show. This differs from the Project Title.

3) Series Description (120 character limit): _____

(This will appear in TV listings and on the web.)

4) Series Type:

- a) Length: Check one: [] half hour series (no longer than 00:28:30) or [] one hour series (no longer than 00:58:30) or [] Neighborhood Boards ONLY (up to 2:58:30)

b) Requested Frequency: Must Check One:

New series only qualify for monthly status.

[] One new episode per month (MONTHLY)

Must Check one: New episode airs on what week: [] 1st [] 2nd [] 3rd [] 4th

[] Two new episodes per month (SEMI-MONTHLY)

Must Check one: New episodes air on what weeks: [] 1st & 3rd [] 2nd & 4th

[] One new episode each week (WEEKLY)

A Series requires one new episode PER PREMIERE AIRING, submitted at least five days prior to the first air date to the Māpunapuna Media Center. Episodes can be submitted to other centers but with enough lead time for the centers to deliver them to the Māpunapuna Center. Failure to submit new episodes on time will result in preemptions and possible forfeiture of time slots.

i. Type: [] Local (at least 50% of content) [] Non-Local ii. Picture Quality: [] SD (standard def) [] HD (high def)

iii. Adult Content: [] Yes (contains graphic violence, sexual content or profanity) [] No

(Adult material will be scheduled after midnight and may be accompanied by viewer advisories and/or age verification)

5) Scheduling: Prime Time Requested? [] Yes (between 6:00 PM – 10:00 PM) [] No

NOTE: No guarantee of previous year timeslots (available to locally-produced series only)

6) About this project

a. Created at: (Check ONE)

- [] Kaimukī MSC [] Māpunapuna MSC [] Nānākuli MSC [] Wahiawā MSC [] Studio@Capitol [] Waipahu MSC [] Windward MSC [] Neighbor Island [] O'ahu (No 'Olelo equipment used) [] Out-of-State

b. Subject: (Check ONLY ONE) NOTE: We reserve the right to reclassify your program at our discretion.

- ___Arts/Entertainment ___City ___Community
___Cultural/Ethnic ___Education ___Environmental/Health
___Growth ___Inspirational ___National/International
___Native American ___Native Hawaii/Issues ___Pacific Islander
___Social/Political ___Sports ___State

c. Language: More than 50% of the program is in the _____ language.

Don't forget: every episode submitted in this series must have an End Slate with O'ahu contact information in the last 10 seconds of the program; 'Olelo will not air an episode without an End Slate.

Distribution Agreement:

Please check ALL applicable boxes below:

- I am a resident of O`ahu. *If you are not a resident of O`ahu, you must have a local O`ahu sponsor.*
- I am 18 years of age, or over. *If you are under 18, this form must be signed by a parent/legal guardian.*
- I am signing this form as a parent/legal guardian of the minor listed below.
- I am the local PRESENTER* -or- I am the PRODUCER.

I have read, understand and agree to abide by the rules and procedures for the use of 'Olelo's equipment and transmission services ("Client Services Agreement"):

Name (Print): _____ Signature: _____ Date: _____

Representing: (Organization's or minor's name) _____

Mailing Address:

Street _____ City _____ Zip _____

Contact Numbers:

Home _____ Office _____ Fax _____ Cell: _____ Email _____

The contact information must agree with the information in 'Olelo's database.

Check here if your contact information has changed.

*If you are not the copyright holder, attach a permission letter with contact information for the actual copyright holder.