



APTN 2nd WINDOW LICENCING APPLICATION FORM

Program Title: _____

Submission Date: _____

Submission Category: _____

Proposed Broadcast Date: _____

Window Offered to APTN: _____

Category: _____

Number of Episodes: _____

Length of Episodes: _____

Region of Production: _____

Production Company: _____

Name: _____

Title: _____

Address: _____

City/Prov/Postal: _____

Phone Number: _____

Fax Number: _____

E-Mail Address: _____

Website: _____

Do you plan on delivering another language version: No Yes

Specify Version Language(s): _____

Will it be subtitled or dubbed? _____

Who is the first window broadcaster: _____

Specify Version Language(s): _____



APTN requests applicants to voluntarily self-identify as Aboriginal. Where the applicant is an individual, an Aboriginal individual is defined to include a First Nations, Métis or Inuit individual who resides in Canada. Where the applicant is a production company, an Aboriginal production company is defined as a sole proprietorship, a limited company, a co-operative, a partnership or a not-for-profit organization in which Aboriginal persons have at least 51% ownership and control; or a joint venture consisting of two or more Aboriginal businesses or an Aboriginal business and a non-Aboriginal business, provided that the Aboriginal business(es) has at least 51% Aboriginal ownership and control of the joint venture. APTN requires statistics in these areas for reporting requirements to the Board of Directors. Consistent with our founding objectives, APTN gives preferential treatment to Aboriginal individuals and production companies in the selection of production proposals.

		Inuit	First Nations	Métis	Non-Aboriginal
Producer:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Associate Producer:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Director:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writer:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Host:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production Manager:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production Assistant(s):		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Director of Photography:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Researcher(s)/Journalist(s):		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Videographer:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Editor:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound Recordist:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What aspects of APTN's Programming Mandates are reflected in the proposal?

- Aboriginal Context
- Aboriginal Director
- Aboriginal Producer
- Aboriginal Talent
- Other (please specify) _____



BUDGET/FINANCE (please indicate if financing is committed or pending):

Financing source	Dollar amount expected	Percentage of total budget	Confirmed or pending?
<i>APTN licence FEE</i>			
CMF Aboriginal Program			
CMF APTN Performance Envelope (please specify genre)			
Producer Deferrals			
Other Broadcaster Licence			
Federal Tax Credits			
Provincial Tax Credits			
Other Sources (please specify)			
Other Sources (please specify)			
Other Sources (please specify)			
Other Sources (please specify)			
Total budget			



CHECKLIST OF ATTACHED MATERIALS

- Signed **Proposal Agreement for Producers** form
- Short and long synopsis (short is one paragraph or less; long is one page maximum)
- Program format and summary (identify the genre, the running time, number of episodes and provide a summary of how the story is structured, how it is told, what is the focus, how will the program will be treated in its visual and audio presentation)
- Script or treatment
- Finance Plan and Budget (including commitment letter of other broadcaster(s) indicating exclusivity term and financial contribution). Please also include the amount of your financial request to APTN
- Corporate Information (including past production experience/broadcasting credits); APTN will not consider licencing proposals submitted by individuals or companies that do not have relevant production experience
- Incorporation documents for all Producer(s), Production Companies and Parent Company (ies), as applicable
- List of shareholders and ownership share
- List and resumes of key creative personnel/principle crew members
- Identify your target audience and outline the program's relevance and appeal to APTN's audience
- Complete Chain of Title identifying the following:
 - Writers agreements, option/purchase agreements, transfers of rights agreements and all other agreements demonstrating that the producer(s) holds the rights to the following:
 - The creative material and concept
 - The rights to produce, distribute and exploit the project
- Creative materials (such as storyboards, sketches, photos, VHS of Director and/or Producer's previous works)
- An Aboriginal training plan
- Proposed production schedule, including target dates for confirmation of funding, completion of production and proposed broadcast