



PORTLAND COMMUNITY MEDIA
 2766 NE Martin Luther King Jr. Blvd. Portland, OR 97212
 Tel (503) 288-1515 Fax (503) 288-8173

PROGRAM PLANNING GUIDE

PROJECT NUMBER: _____

PROGRAM ID: _____

For office use only

Program Title: _____

Producer of record: _____

Telephone: _____ E-mail: _____

Co-Producer of record: _____

Telephone: _____ E-mail: _____

Category (check one): Arts Entertainment Education Spiritual Public Affairs Senior's Health
 Ethnic Information Children's Community Information Municipal Sports Culture Other

Brief Description (please be descriptive and accurate): _____

Production/Post-Production Planning:

*Please use this form to provide PCM an **estimate** of how much facility/field equipment time would be used to complete your program. Return this form to your assigned Facilitator. This copy will remain in your file. Each PCM producer is limited to two active projects at any one time. One of those projects may be a series.*

Production type (please circle your selection) Studio Field Live

Camera Check-outs	Editing Session	Studio Sessions

Estimated Length of Program: _____ : _____ : _____
 (Hours) (Minutes) (Seconds)

Estimated completion date: _____ / _____ / _____
 (Month) (Day) (Year)

Signature: _____

Date: _____

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Facilitator: _____



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Additional Pre-Production Information (suggested)

1) Target Audience:

Whom are you trying to attract? Be specific. There is no such thing as a "general audience"

2) Key Messages:

One or two key "thrusters" – those most important to the project's success.

3) Key Benefits:

What is in it for the audience?

4) Desired Message Tone:

How do you want the message perceived -- creative, fun, warm, active?

5) Project Timeline:

Indicate major milestones.

6) In what areas do you feel you may need additional assistance?

7) Do you need any additional assistance with volunteer coordination?