



Program Proposal Form

KBTC Public Television provides a window to the world by using the power of the media to enrich lives through programs and services that educate, inspire, and entertain.

Name: _____

Organization / Company: _____

Street Address: _____

City / County / State / Zip: _____

Daytime Phone: _____ Cell Phone: _____

Email Address: _____

Program Title: _____

Program Type / Length: _____

Brief Description (2 or 3 sentences):

Intended Audience:

Program's Purpose:

How will your program support the mission of KBTC Public Television to provide a window to the world by using the power of media to enrich lives through programs and services that educate, inspire, and entertain?

What is the potential for community outreach, education plans or website development?

Please provide contact information for people that would be involved with this project (i.e. interviews, experts, etc.) and a description of any existing video or photos that you have the rights to that may be incorporated.

Why would funders want to fund this program?

Total secured and pending funding: _____

List any foundations, corporations, or individuals that you have identified as potential underwriters for your project.

**TO SUBMIT A PROGRAM FOR CONSIDERATION PLEASE COMPLETE THIS
FORM AND THE SUBMISSION RELEASE FORM.**

KBTC IS A SERVICE OF



MAIL TO:

KBTC Public Television
2320 S 19th St
Tacoma, WA 98405

OR EMAIL TO:

programidea@kbtc.org