# **AFRICANA55 RADIO**

**Show Proposal Form**

Please complete the Show Proposal Form and submit to Management for approval. A new program proposal is required for every new show, every new host, every new time slot, and any time there is a major change in program format. Each show or major show change must be approved by the Management Team before it can go live.

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| **Name:**  **Email:** | | **Date:**  **Tel.:** |
| **Describe the type of show you want to produce:**  **Suggested Name of Your Show:**  **Primary Language of the Show:**  **Length of Show:**  **Special or Series**: (Please circle one)   * One-Time-Only Special * Daily Series * Weekly Series * Ongoing   **List Hosts**: **(If hosts exceed three people, please discuss with the Programming** **Dept.):**  Host:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Host:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Host:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Will your show be live or pre-recorded:** Live\_\_\_\_\_ Pre-recorded:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Demo URL:** If you have a podcast, a past show, or another recorded work, please include a link so we can check it out: <http://____>\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Shows that Include Music**  (Please complete below log with Sample Playlist that you might play during a typical show. We are happy to accept an audio sample of your show.)  Name at least 7 different artists/topics you would program into your show: | | |
| **Track Title** | **Artist/Group** | |
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| **Copyright Materials: Will your show include any copyrighted materials that you do not have creator’s permission: Yes/No? If so, please describe:** | | |
| Time slots that you could provide this program: | | |
| Co-host(s), if any? If none, is this reasonably a solo project? | | |
| When would you be ready to go live with your show? | | |
| Answer as many as you wish below. Be prepared to answer *all* of the following questions at the Management Team review of your proposal. | | |
| Relationship to the A55R Mission:   * How specifically does the program relate to the A55R mission statement and programming goals? * How will you support A55R and in its mission? | | |

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| **Longevity of Program:**   * How long can you produce this program? Will you be there for your audience? * Are you able to commit to A55R for at least three months? * Do you have to leave the community for long breaks? * How will the program run when you’re absent? * Do you understand the *Attendance Policy*? |
| **Audience:**   * Who would listen to your program? * What part/countries of the African community do they represent? * How will you encourage a wider variety of listeners? |
| **My Resources:**   * Do you have enough music or materials to broadcast? * Do you have people to interview? * How much time will you devote to your program? * How much time can you contribute to the station as a volunteer? * What additional volunteer support duties will you do to keep A55R on the air in addition to your show (e.g., Ops Shifts, CD review)? |
| **Other Resources:**   * Do you understand you need to facilitate meetings of your own needs? * What equipment and/or music would you need for your show? * What other resources/help would you need? |
| **Uniqueness:**   * Why does A55R need your program? * Is this something anybody can just walk in and produce, or is it something really special and wildly imaginative? * Will there be others doing this same type of program? How is yours different? * Are there other programs like this on A55R or other area radio stations? |

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| **Background of Programmer:**   * Do you need more training than the standard A55R training process? * Do you have other applicable experience? * How are you committed to the African community? * How are you committed to Africa, Africans and People of African Descent? | |
| **Special Features:**   * Can you bring in special guests to this program? * Are there any special events that you can connect with your show? | |
| **Content:**   * Do you understand and agree to follow FCC and station policies? * Do you understand and agree to follow the Station Music Acquisition Policy? * Do you need to clarify your understanding of any policies? * Has your program been broadcast before? Yes/No? If so, where and when?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * If there is not an opening for your show at this time, would you be interested in volunteering at A55R in another capacity? Would you be interested in collaborating with others on a similar idea? If you have other specific interests? | |
| **Sponsorship/Underwriting/Fundraising:**   * Do you know one or more organizations or local businesses that would sponsor your program? * Are there any grant possibilities? * How do you feel about on-air fundraising? * How will you prepare for Fund Drives?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **REQUIREMENTS**  **Thanks for your interest in Africana55 Radio and our mission. Please note the following:**   1. **Voice Test Requirement:** As part of the approval process, hosts of accepted shows will be required to take and pass a brief voice test. 2. **Police Check Requirements:** Please note that if your application is approved, you’ll be required to undergo a Police Check before going on air. 3. Please submit a short bio of Host(s). 4. Attach a Passport size of current photo.   Please submit completed form to: [programs@africana55radio.com](mailto:programs@africana55radio.com). Or mail physical copy (CD or flash drive) of electronic proposal to:  **Africana55 Radio**  **Programming Department**  **P.O. Box 4384**  **River Edge, NJ 07661**  For more information, please contact our Programming Department at [Programs@africana55radio.com](mailto:Programs@africana55radio.com). | |
| **FOR MANAGEMENT TEAM USE ONLY** | |
| Date received: | Date Approved/Declined: |
| By: | By: for Management Team |
| Start date: | Time slot: |
| Official Show Name:  Referred to Training on:\_\_\_\_\_\_\_\_\_\_\_\_Type of Training:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Program Sample (MP3 format) Submitted:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_ | |