

PBS Utah Broadcast Submission Information Form

Submitter Company Name: Contact Name: Address: Phone: Email:
Program Title: Length: (hh:mm:ss) Proposed License Term: Beginning date to Ending date
Releases allowed: (a release = unlimited broadcasts in seven consecutive days) Exclusivity:
 Exclusive to PBS Utah in Salt Lake Market Non-exclusive to PBS Utah in Salt Lake Market Channel/Platform Use (please check all that apply): PBS Utah Primary Channel 7.1 PBS Utah WORLD 7.2 PBS Utah PBS Kids 7.3 Streaming on video.pbsutah.org and other PBS Utah websites Full program For full license term From Beginning date to Ending date Promo Clips Streaming on PBS Utah social media channels (Facebook, Twitter, etc.) Full program For full license term For full license term For full program
 From Beginning date to Ending date Promo Clips Streaming on PBS/PBS station sites Full program



This form must be accompanied by the "PBS Utah Blanket Submission Release" in order for submission to be reviewed or considered by PBS Utah.