

FILM:

COORDINATOR:

MEDIA 2007 DISTRIBUTION  
Call for Proposals EACEA/22/08  
SELECTIVE SUPPORT TO CINEMA DISTRIBUTION

**APPLICATION FORM FILM / GROUPING**  
(to be completed by the Coordinator of the grouping)

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Declaration on the applicant's honour

The coordinator hereby confirms:

- \* that the film for which support is requested is a European film as defined in the guidelines applicable to Call for proposals EACEA/22/08; that the film does not consist of advertising, pornographic or racist material nor advocates violence;
- \* that it is familiar with the Guidelines "Support for the trans-national distribution of European films and the networking of Distributors" to Call EACEA/22/08 of the MEDIA 2007 Programme and that it accepts and observes the conditions and procedures specified therein;
- \* that it strictly respects the confidentiality of any document (including the contents of sealed envelopes) it receives from the distributors of the grouping;
- \* that the information contained in this application form are true and verifiable;
- \* that the person signing this application has been duly authorised by the company to do so.

Name of the coordinator: ..... Position in the company: .....

Signature of the coordinator: .....

Date:

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**CHECK LIST**

**I. Information concerning the Coordinator**

**II. Information on the grouping of distributors**

**III. Information on the film**

***If the information on the film has already been supplied to the Agency as a part of an application in response to previous calls for proposals, they need not be supplied on this occasion. A full list of all films which have been processed is available for consultation at: [www.eacea.ec.europa.eu/media/films](http://www.eacea.ec.europa.eu/media/films)***

- MEDIA Film Form duly filled in
- Production cost and corresponding financial plan of the film in national currency, certified by the delegate producer and/or by the relevant national authority.
- Short synopsis of the proposed film (maximum 2 pages).
- DVD of the film (in the case of a first submission under the Selective Scheme, if available).

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COORDINATOR:

**I. Information concerning the Coordinator:**

<b>Name of the Company:</b> .....			
Activity:	<input type="checkbox"/> Producer	<input type="checkbox"/> Sales Agent	<input type="checkbox"/> Distributor
Contact Person:	.....		
Contact's position within the company:	.....		

<b>Address for correspondence:</b>			
Street:	.....	Tel:	.....
Town :	.....	Fax :	.....
Post code :	.....	E-mail :	.....
Country:	.....		

**II. Information on the grouping of distributors applying at the current session:**

<b>Distributors participating in the grouping:</b>			
Country	Distributor	Forecast release date	Amount of MEDIA support applied for (in €)
1 AT Austria	.....	.....	.....
2 BE Belgium	.....	.....	.....
3 BG Bulgaria	.....	.....	.....
4 CH Switzerland	.....	.....	.....
5 CY Cyprus	.....	.....	.....
6 CZ Czech Rep.	.....	.....	.....
7 DA Denmark	.....	.....	.....
8 DE Germany	.....	.....	.....
9 EE Estonia	.....	.....	.....
10 ES Spain	.....	.....	.....
11 FI Finland	.....	.....	.....
12 FR France	.....	.....	.....
13 GR Greece	.....	.....	.....
14 HR Croatia	.....	.....	.....
15 HU Hungary	.....	.....	.....
16 IS Iceland	.....	.....	.....

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17 IE Eire - Ireland.....	.....	.....
18 IT Italy...	.....	.....
19 LI Liechtenstein .....	.....	.....
20 LT Lithuania .....	.....	.....
21 LU Luxemburg .....	.....	.....
22 LV Latvia .....	.....	.....
23 MT Malta .....	.....	.....
24 NL Netherlands.....	.....	.....
25 NO Norway .....	.....	.....
26 PL Poland .....	.....	.....
27 PT Portugal .....	.....	.....
28 RO Romania .....	.....	.....
29 SK Slovakia .....	.....	.....
30 SU Sweden .....	.....	.....
31 SV Slovenia .....	.....	.....
32 UK United-K. ....	.....	.....
<b>TOTAL</b>		.....

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**III. Information on the film**

**Original title:** .....

**Cast and crew list:**

**Director:**

Name: ..... Nationality / Residence: .....

**This film is the director's**

1<sup>st</sup> feature film    2<sup>nd</sup> feature film    Other

**Script Writer:**

Name: ..... Nationality / Residence: .....

**Main cast:**

Name: ..... Nationality / Residence: .....

Name: ..... Nationality / Residence: .....

Name: ..... Nationality / Residence: .....

**Composer:**

Name: ..... Nationality / Residence: .....

**Production design (art direction):**

Name: ..... Nationality / Residence: .....

**Director of photography:**

Name: ..... Nationality / Residence: .....

**Editor:**

Name: ..... Nationality / Residence: .....

**Sound:**

Name: ..... Nationality / Residence: .....

**Shooting location:**

Country:.....

**Laboratory:**

Country: .....

FILM:

COORDINATOR:

**Genre:**  
 Fiction                       Documentary                       Animation

**Length (in minutes):** ..... **Format:** .....

**Date of start of principal photography:** .....

**Date of completion of principal photography:** .....

**Shooting language:** .....

**Year of copyright:** .....

**Cost of production:** in local currency .....in EURO .....

**Financing Plan of the film**

Please enclose the Financing Plan, including the Total Production Cost, certified by the lead producer. The Financing Plan should identify the (co)producer(s) of the film and their share in the (co)production.

*Statement of confidentiality: the above requested document is strictly for the internal use of the MEDIA Programme and for qualification purposes only.*

**Producer (or Lead producer in case of international co-productions):**

Name of the Company	Town	Country	% in the co-production
.....	.....	.....	.....

**Co-producers:**

Name of the Company	Town	Country	% in the co-production
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
			<b>TOTAL</b> .....

**World sales agent (if different from the coordinator):**

Name of the Company: .....

Street: ..... Tel: .....

Town: ..... Fax: .....

Country: ..... E-mail: .....