

SCHEDULE II

(See Clause 6)

Department of Information & Publicity

Government of Goa

APPLICATION FOR AVAILING GRANT IN AID/ FINANCIAL ASSISTANCE FOR PRODUCTION OF FILMS BY
GOAN PRODUCERS

1. Name of the producer
Age Sex
2. Address Office:
..... Tel:
Residence: Tel:
3. Rep. by
4. Registration code no –with Department of Information
5. Whether Individual/Partnership/Ltd. CO. /Society.....
6. Type of film you propose to make : Feature/Short Film Documentary
7. In what format will it be filmed digital/Betacam/Digi-beta/celluloid etc... ..
8. Duration of film:Hrs. Min..... Sec.
9. Have you produced any celluloid film or video film earlier: Yes/No.
In case of "yes" give details of the film,
10. Was your film censored: Yes/No. :
11. Has your film participated in any Goan/National/ International Film Festival: Yes/No
In case of "yes" give details
12. Has your film won any awards in the festival: Yes/No:.....
If “yes” give details.....
13. Have you ever before availed subsidy for producing films from the Government of Goa or any Government agency:
Yes/No if "yes" give details
14. Name of the film you propose to produce for which you are applying for financial assistance:
.....
15. Whether the film is Original/Remake/Dubbed:
16. Whether the film is based on any Novel then Title & Author's name
17. Language of the film:
18. Total cost of the film:
19. Amount of financial assistance applying for production of the film:
(Attach separate sheet giving details.)
20. Details of expenditure you are 'going to incur for production of the film:
(Attach separate Sheet)
21. Details of balance amount to be raised by producer

22. Name of Director who will be directing your film and his/her address:
.....
(also attach his/her bio-data on separate sheet)

23. Name and addresses of following with bio-data

- 1.Name of the Story Writer
- 2.Name of the Screenplay writer
- 3.Name of Lyrics writer :
- 4.Name of Dialogues writer :
- 5. Name of Music Director
- 6. How many songs you propose to include in the film:.....
- 7. Name of Choreographer if any:
- 8.Name of Director of photography:,
- 9. List of the main actors with their character name in the film.....
.....

24.When do you propose to start with the shooting:
Please enclose shooting schedule.

25. Time required for shooting of the film:

26. Time required for post production:

27. When do you expect the film to be release for public :

28. When do you expect the film to get ready and duly censored: Month: year

29. Within how many months you expect to complete the film from the date of receipt of first installment:

I/WE HEREBY DECLARE THAT WHATEVER INFORMATION PROVIDED IN THIS FORM IS CORRECT TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF AND NO PART OF IT IS FALSE (if the information given is found to be false the application shall be rejected)

Date:

.....
Signature of the Producer

Seal

CHECK LIST OF DOCUMENTS ENCLOSED WITH APPLICATION FORM

- 1. Synopsis - Story
- 2. Screenplay
- 3. Bio-data of Story Writer
- 4. Bio-data of the Producer
- 5. Bio-data of the Director
- 6. Bio-data of the Music Director
- 7. Bio-data of the Director of Photography
- 8. Bio-data of the Editor
- 9. Bio-data of the Lyricist
- 10. Bio-data of the Art Director
- 11. Projected expenditure