

# Application Form

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for the **SF-AiD** program.

Please fill in this application form correctly and entirely.

## 1. Film/Video

Original title

English title

Director

Country

Year

Length (min)

This is the

1.

2.

3. +

documentary the director has produced.

The film was shown at the following occasions:

Who has rights in sound and vision?

## 2. Original film format

### 3. Team

Director

Address

Phone

E-Mail

Cinematographer

### 4. Production/Contact

Company

Name

Address

Phone