

FILM SUBMISSION FORM



CONTACT INFORMATION

This film submitted through DiBacco Media Consulting & 830 productions.
Contact name: Kevin DiBacco

Production company name: _____
Mailing address: _____
City: _____ Postal/Zip code: _____
Country: _____
Telephone: _____ Fax: _____ Email: _____
How did you hear about Shorts International: _____

FILM INFORMATION

Title in English (If applicable): _____
Country of Origin : _____ Original Language: _____
Total Running Time: _____ mins _____ sec Date Completed: _____
Film Synopsis: _____

Director _____
Writer _____
Producer _____
DP _____
Editor _____
Cast _____

Student Film: ☐ NO ☐ YES, School?
SAG Agreement: ☐ NO ☐ YES, Specifics (i.e. Experimental, Student, etc.)

WE ARE NOW HAPPY TO ACCEPT URL VIDEO LINKS (VIMEO, YOUTUBE etc)

Please send URL & password via email.

PLEASE TICK ALL THE BOXES THAT APPLY:

Genre: ☐ Live-Action ☐ Animation
Animation Style: ☐ CGI ☐ 2D ☐ Stop-Motion ☐ Flash
Category: ☐ Comedy ☐ Action ☐ Drama ☐ Documentary ☐ Thriller ☐ Sci-Fi
Gauge: ☐ 35MM ☐ Hi-Def ☐ Digital ☐ Mini-DV ☐ 16MM
Format: ☐ Color ☐ B&W
Video Framing: ☐ Full ☐ Pan & Scan ☐ LB 2.35 ☐ LB 1.85 ☐ LB 16X9 ☐ _____
Sound: ☐ Dolby SR ☐ Dolby A ☐ Optica ☐ Mono ☐ Stereo
Dialogue: ☐ English ☐ French ☐ Spanish ☐ None ☐ Other
Subtitles: ☐ No ☐ Yes, in what language?
M&E Track: ☐ No ☐ Yes
Surround: ☐ No ☐ Yes, specifics (ie: Dolby Pro-Logic, 5.1, etc)
Closed Captioned: ☐ No ☐ Yes

Edited on Final Cut Pro? ☐ YES ☐ NO

Content Issues: ☐ Nudity ☐ Swearing ☐ Violence ☐ Other _____

DVD Screener: ☐ Multi-Region ☐ NTSC ☐ PAL

Film festival appearances _____

Film festival Awards _____

On-line exposure _____

Off-line exposure _____

Academy Award Qualifier ☐ Yes ☐ No

If yes: ☐ Festival Winner ☐ 4-Walled ☐ Student Academy Winner

If festival winner, which festival _____

Prior exhibition & sales _____

PLEASE SEND THIS FORM ALONG WITH \$25 administrative fee, LINK AND PASSWORD TO:

dibaccofilms@mac.com

Or

Robert Sciglimpaglia Esq.

robscig@usa.net