



FRANCE – SOUTH AFRICA CO-PRODUCTION WORKSHOP Application Form

PROJECT TITLE :	
Genre & duration :	
Film original language :	
Producer (name, company contact details) :	
Director (name and contact details):	
Budget and finance plan (confirmed funding where possible) :	
Development stage of the project :	
Proposed participant to the workshop (with contact details) :	
Comment :	

Name :

Place:

Date:

Signature :
