

## PROJECT PDA APPLICATION FORM

Please ensure that all relevant categories of information have been filled in. If inapplicable, please insert 'NA'

Particulars of Applicant	
Name of Applicant	
Identification Card (NRIC) No.	
Name of Company / Organisation / Institution (if applicable)	
Mailing Address	
Contact Telephone No	(O) (HP)
Email Address	
Particulars of Film Proposal	
Title of Film (indicate if working title)	
Genre of Film	
Particulars of Application	
Please tick if the following documents are enclosed in the application: (Items marked * must be provided)	
A. *Story Outline/ Synopsis/ Logline of film - 3 sets	<input type="checkbox"/>
B. *Showreel or original short film – 3 copies	<input type="checkbox"/>
C. *One-minute video introduction	<input type="checkbox"/>
D. Other relevant supporting documents	<input type="checkbox"/>

### Declaration

I hereby declare:-

- i. that as the signatory, I have the full authority to make this submission to the MDA, and that the information contained in this application is accurate, true and complete, and meets all the applicable criteria as set out in the Guidelines for Project PDA;
- ii. that I shall notify the MDA, within reasonable time, if changes occur to any information submitted and shall, if so requested by the MDA, provide all relevant material supporting such changes;
- iii. that the MDA is authorised to disclose any information in this application to any or all of the third parties as may be indicated in this application;
- iv. that the MDA shall have the right to reject this application if any information submitted hereto is found to be incomplete, false or misleading in any material aspect, and all materials submitted with this application will not be returned; and
- v. that I agree to abide by the rules and conditions governing the application.

Name: \_\_\_\_\_

NRIC No: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_