



EDITORIAL SPECIFICATION for SCRIPTED PRODUCTIONS

PLEASE COMPLETE ALL RELEVANT SECTIONS GIVING DETAILS OF YOUR COMMISSION PRIOR TO PFC APPROVAL

THE COMPLETED DOCUMENT SHOULD BE SUBMITTED TO YOUR SKY PRODUCTION MANAGER AND/OR COMMISSIONING EDITOR

Date:

PRODUCTION COMPANY <i>Name and Address, Contact Details</i>	
SKY COMMISSIONING EDITOR	
SOURCE OF PROGRAMME IDEA / CO-PRO <i>i.e. who originated idea (Sky, Production Company, co-production etc.)</i>	

1. PROGRAMME DETAILS

WORKING TITLE OF PROGRAMME	
INTENDED CHANNEL <i>Sky Atlantic, Sky One, Sky Arts</i>	
NUMBER OF EPISODES	
EPISODE DURATION WITH NO. OF PART BREAKS	
MASTER DELIVERY DATES (ALL EPISODES)	
TX DATE (IF KNOWN)	

2. FINANCIAL

TOTAL BUDGET	
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COST PER EPISODE	
CASH FLOW PAYMENT SCHEDULE	
COST REPORT SCHEDULE DATES	
<p>HAS A TRUST ACCOUNT BEEN SET UP? Cashflow payments will only be paid into a trust account.</p> <p>BANK MANDATE Please confirm that your bank mandate is complete</p>	

3. EDITORIAL INFORMATION

<p>INTENDED TRANSMISSION TIME Pre or post watershed?</p>	
<p>DETAILED EDITORIAL SYNOPSIS Include as much detailed information as possible</p>	
WHAT'S THE VISION OF THE SERIES?	
WHAT'S MOST IMPORTANT ABOUT IT?	
WHAT MUST WE AVOID?	
WHAT'S THE TONE OF THE SERIES?	
<p>WRITER BRIEF Named writer/team/single, indication of their vision for the project</p>	
<p>DIRECTOR BRIEF Named/style/indication of their vision for the project</p>	



<p>DESIGN BRIEF <i>Named/style/indication of their vision for the project</i> <i>Period/contemporary. Set builds/style/FX</i></p>	
<p>COSTUME BRIEF <i>Indication of style and tone</i></p>	
<p>MUSIC BRIEF <i>Specially composed/commercial music/library music. Titles music, tone of sound track</i></p>	
<p>EDITING STYLE <i>Indication of style and tone</i></p>	
<p>CASTING BRIEF <i>Named aspirations re: main cast/casting levels per ep or over series/guest names/children/accents</i></p>	
<p>CGI / VIS FX REQUIREMENTS <i>Style, how much per episode</i></p>	
<p>SCRIPT APPROVAL <i>Draft number and proposed dates for delivery to Commissioning Editor</i></p>	

4. KEY PERSONNEL

(Sky Commissioner approval is required on all HoD's)

EXECUTIVE PRODUCER(s)	
WRITER(s)	
PRODUCER(s)	
DIRECTOR(s)	
SCRIPT EDITOR	
LINE PRODUCER	



CASTING DIRECTOR	
FIRST ASSISTANT DIRECTOR	
PRODUCTION DESIGNER	
D.O.P.	
COSTUME DESIGNER	
MAKE UP DESIGNER	
EDITOR	
COMPOSER	
POST PRODUCTION SUPERVISOR	
PRODUCTION ACCOUNTANT	
OTHER	

5. DIVERSITY & INCLUSIVITY

DIVERSITY ON SCREEN BRIEF <i>Include how the production meets Sky's targets</i>	
DIVERSITY OFF SCREEN BRIEF <i>Include how the production meets Sky's targets</i>	
CONFIRM YOU HAVE PROVIDED US WITH YOUR EQUAL OPPORTUNITIES POLICY	

6. COMPLIANCE

BRIEF DESCRIPTION OF POTENTIAL COMPLIANCE ISSUES IN CONSIDERATION OF	
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<p>SKY EDITORIAL GUIDELINES <i>i.e. Pre/Post Watershed, product placement arrangements and signalling etc.</i></p>	
<p>WILL ANY CHILDREN OR YOUNG PEOPLE BE PRESENT OR OTHERWISE INVOLVED DURING PRODUCTION? <i>If the answer is YES or POTENTIALLY; please provide a copy of your Child Protection Policy</i></p>	
<p>ARE THERE SCENES OF INTIMACY TO BE FILMED? <i>If YES, please discuss with your commissioning editor</i></p>	
<p>BULLYING AND HARASSMENT POLICY <i>Please confirm that you have read the Code of Conduct policies for employee, suppliers and business. Please provide a copy of your Anti-bullying and Harassment policy.</i></p>	
<p>MODERN SLAVERY AND LABOUR RIGHTS <i>Please confirm that you have read Sky's information sheet on modern slavery and Sky's Human Rights Policy. Please state what steps you will take to address labour rights risks in production.</i></p>	

7. PRODUCTION DETAILS

<p>PRE-PRODUCTION <i>No. of days/weeks and dates</i></p>	<p>First Day:</p> <p>Last Day:</p> <p>TOTAL PERIOD:</p>
<p>PRINCIPAL PHOTOGRAPHY <i>No. of days/weeks and dates</i></p>	<p>First Day:</p> <p>Last Day:</p> <p>TOTAL PERIOD:</p>



STUDIO/LOCATION RATIO PER EPISODE <i>if known</i>	LOCATION days: STUDIO days:		
GEOGRAPHICAL LOCATION(s) OR PROPOSED STUDIO			
SPECIAL FX DETAILS <i>if anticipated</i>			
DETAILS OF STUNTS <i>if anticipated</i>			
ARE THERE ANY OTHER SPECIFIC HAZARDOUS ELEMENTS TO THE PROGRAMME/SERIES ENVISAGED <i>If YES please give details</i>			
IF ANY THE ABOVE THREE BOXES HAVE BEEN COMPLETED PLEASE SUPPLY BRIEF DETAIL OF ANY ADDITIONAL INSURANCE REQUIRED			
PLEASE PROVIDE EVIDENCE OF WHAT CYBER SECURITY MEASURES YOU HAVE IN PLACE TO PROTECT CONTENT AND PROVIDE A COPY OF YOUR CYBER SECURITY POLICY COVER			
POST PRODUCTION BRIEF <i>i.e. format, CGI, facility house, sound recording studio etc.</i>			
ASPECT RATIO <i>e.g. 16:9</i>			
DURATION OF POST PRODUCTION SCHEDULE	Per Ep	No. of Days	Dates
	Off Line		
	On Line		
	Grade		
	Tracklay Mix		
TITLES SEQUENCE			



<p>SKY REQUIRES PROGRAMMES TO BE DELIVERED BY FILE AS-11 WITH 5.1 DOLBY E AUDIO <i>Please confirm if you are also delivering in UHD SDR, UHD HDR and Dolby Atmos</i></p>		
<p>PLEASE CONFIRM THE KEY PUBLICITY & MARKETING DELIVERABLES FOR THE PROGRAMME <i>Please refer to the appendix for specific details</i></p>	<p>EPK (drama only)</p>	
	<p>Stills (episodic & generic)</p>	
	<p>Trailers</p>	

8. COPYRIGHT CLEARANCE

<p>WILL THE DELIVERED PROGRAMME(S) CONTAIN ARCHIVE FOOTAGE? <i>If YES please give brief description and source anticipated</i></p>		
<p>DO YOU ENVISAGE ANY PROBLEMS MEETING SKY'S CLEARANCE REQUIREMENTS <i>If YES please give details</i></p>		

9. HEALTH & SAFETY

<p>DO YOU HAVE H&S APPROVAL (EITHER UNDER THE JOINT H&S VETTING SCHEME OR SKY'S SCHEME?)</p>		
<p>PLEASE PROVIDE A COPY OF YOUR HEALTH AND SAFETY POLICY?</p>		
<p>PLEASE PROVIDE A COPY OF YOUR COVID-19 POLICY?</p>		
<p>HAS THE PRODUCTION READ AND UNDERSTOOD SKY'S COVID-19 PROTOCOL GUIDELINES?</p>		
<p>HAVE THE PRODUCTION'S COVID-19 PROCESSES SUCH AS SOCIAL DISTANCING AND CREW TRAINING BEEN DISCUSSED WITH SKY STUDIOS?</p>		
<p>HAS THE PRODUCTION PUT IN PLACE AN APPROPRIATE WAY TO IDENTIFY ANY MEMBER OF CAST AND CREW WHO MAY BE CONSIDERED CLINICALLY VULNERABLE?</p>		



NAME OF PERSON RESPONSIBLE FOR HEALTH & SAFETY ON THIS PRODUCTION.	
WHICH INDIVIDUAL OR COMPANY IS THE COMPETENT SOURCE OF ADVICE FOR THE PRODUCER IN RELATION TO HEALTH & SAFETY ON THIS PRODUCTION? WHAT IS THEIR QUALIFICATION AND EXPERIENCE?	
DO YOU ANTICIPATE LONG WORKING HOURS ON THIS PRODUCTION, AND IF SO HOW WILL YOU ENSURE WORKER WELLBEING IS NOT ADVERSELY AFFECTED?	

10. SUSTAINABILITY

<p>SKY HAS A STRONG COMMITMENT TO THE ENVIRONMENT AND HUMAN RIGHTS. OUR CODE OF CONDUCT AND ACCOMPANYING POLICIES SET OUT THE ENVIRONMENTAL, ETHICAL AND SOCIAL RESPONSIBILITY STANDARDS WE EXPECT OUR PRODUCTIONS TO ADHERE TO. YOU CAN VIEW THE POLICY HERE: https://www.skygroup.sky/suppliers WE EXPECT ALL OUR COMMISSIONS TO BE ALBERT CERTIFIED AND COMPLETE AN ALBERT CARBON FOOTPRINT. FINAL STAGE PAYMENT IS ATTACHED TO DELIVERY OF THIS DATA</p>	
PLEASE CONFIRM THAT ALBERT CERTIFICATION WILL BE COMPLETED FOR THIS PRODUCTION. GREEN MEMO IS A DELIVERY REQUIREMENT (BEFORE FILMING) http://www.bafta.org/about/sustainability/albert/	
PLEASE CONFIRM THAT YOU HAVE READ AND WILL BE ABLE TO COMPLY WITH SKY'S POLICY ON THE USE OF SINGLE-USE PLASTIC	
PLEASE CONFIRM PLANET TESTING OPPORTUNITIES HAS BEEN DISCUSSED AND WITH YOUR COMMISSIONING EDITORS	
PLEASE CONFIRM YOU WILL PROVIDE A RELEVANT ACTION PLAN AND OFFSEETING ALLOWANCE	

11. DATA PROTECTION

PLEASE CONFIRM THAT THE PRODUCER HAS A DATA PROTECTION POLICY THAT IS COMPLIANT WITH GDPR	
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I agree that the above is a true and accurate representation of the editorial specification of the programme.

Signed by:-
For and on behalf of Production Company (Editorial Sign-off)

Print name:-

Role:

Date:-

Signed by:-
For and on behalf of Production Company (Production Sign-off)

Print name:-

Role:

Date:-

Signed by:-
For and on behalf of Sky (Editorial Sign-off)

Print name:-

Role:

Date:-

Signed by:-
For and on behalf of Sky (Production Sign-off)

Print name:-

Role:

Date:-