



CANADA  
MEDIA FUND

FONDS DES MÉDIAS  
DU CANADA

Final cost document  
Linear Content  
(formerly the Convergent Stream)  
2025-2026

## FINAL PRODUCTION SCHEDULE

Project Title: \_\_\_\_\_  
CMF File No.: \_\_\_\_\_  
Applicant Production Company: \_\_\_\_\_  
Fiscal Year of Application: \_\_\_\_\_ (YYYY-YYYY)  
Application Program: \_\_\_\_\_

### 1) PRE-PRODUCTION SCHEDULE

from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ # of days \_\_\_\_  
(YYYY / MM / DD) (YYYY / MM / DD)

### 2) PRODUCTION SCHEDULE

Principal  
Photography from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
(YYYY / MM / DD) (YYYY / MM / DD)

#### # of days of shooting (breakdown by city, country)

Location #1	_____	Days	_____
Location #2	_____	Days	_____
Location #3	_____	Days	_____
Location #4	_____	Days	_____
Location #5	_____	Days	_____

# of days \_\_\_\_

### 3) POST-PRODUCTION SCHEDULE

Offline Edit from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ # of days \_\_\_\_  
(YYYY / MM / DD) (YYYY / MM / DD)

Online Edit from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ # of days \_\_\_\_  
(YYYY / MM / DD) (YYYY / MM / DD)

Sound Edit from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ # of days \_\_\_\_  
(YYYY / MM / DD) (YYYY / MM / DD)

Location: \_\_\_\_\_ Total # of days of post-production: \_\_\_\_\_

Broadcaster master completion: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(YYYY / MM / DD)

#### 4) DELIVERY SCHEDULE to first window broadcaster(s)

(Where applicable indicate delivery dates for ALL language versions)

### One-off or first episode

(YYYY / MM / DD)

**Last episode (if a series)**

(YYYY / MM / DD)

**Please Note:** Any changes to the original date(s) of delivery to the broadcaster(s) must be indicated on their respective Confirmation of Broadcast Requirements Form.

**Signature:**

I am duly authorized

I am duly authorized

Name:

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Please print

Please print

**Title:**

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Date:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(YYYY/MM/DD)

(YYYY/MM/DD)

**Signature:**

I am duly authorized

I am duly authorized

Name:

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Please print

Please print

**Title:**

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Date:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(YYYY/MM/DD)

(YYYY/MM/DD)