

UAF EXTENSION COMMUNICATIONS POLICIES AND PROCEDURES



VIDEO SCRIPT REVIEW FORM

Name of author(s): _____

Title of publication: _____

Reviewer's name: _____

To be filled out by reviewer. *Please review the enclosed video, keeping in mind the questions below.*

Once completed, please return this form and a marked-up version of the enclosed document to:

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Is the subject matter accurate and current?

Yes _____ No _____

Comments:

Is the length of the video right for the intended message?

Yes _____ No _____

Comments:

Will the intended audience be able to clearly understand the message the way it is presented?

Yes _____ No _____

Comments:

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Do the visuals presented make sense for the subject matter? Are they easy to understand?

Yes _____ No _____

Comments:

Reviewer Recommendation:

- a. Recommend to publish
- b. Recommend to publish with minor revisions (noted on manuscript or listed below)
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