Publication Proposal Questionnaire

Return this signed form and your responses to Educational Communications, College of Agricultural and Life Sciences, 83844-2332, or fax it to (208) 885-9046.

Please use a separate sheet to respond to the questions listed below. Attach your responses to this questionnaire and submit them to your unit head. Your unit head’s signature indicates support for developing a manuscript.

If you need assistance answering these questions please contact an editor in Educational Communications (Diane Noel, dnoel@uidaho.edu, phone: 885-6999).

1. **Author(s).** List the author name(s).

2. **Title.** Identify the working title of the publication.

3. **Need.** What current situation necessitates this publication?

4. **Intended audiences.** Identify the primary, secondary, and other audiences this publication is intended to reach.

5. **Purpose.** What is this publication intended to accomplish? How will it meet the identified need?

6. **Contribution.** How will your publication differ from and be more effective than other print/non-print sources of similar information?

7. **Uses.** How will the intended audiences use this publication?

8. **Marketing.** What events, lists, or other strategies will you use either to distribute copies or to promote a web-only or for-sale publication?

9. **Format.** Do you envision an online-only publication, a print-only publication, or both online and print (most titles are published in print and online)? How many photographs, illustrations, graphs, and tables do you propose? What is the anticipated length of your manuscript (double-spaced pages)? Will the publication benefit significantly from color printing? If so, how?

10. **Budgetary support.** What are your anticipated funding sources (i.e., grants, commodity groups, IAES or UI Extension funds, critical issues funds)?

11. **Timetable.** By what date do you need the publication?

I have read the attached proposal and agree that this publication project should be initiated. The author(s) and I acknowledge that my signature does not guarantee funding.

Unit administrator’s approval: ___________________________ Date: ________________

Extension, 4-H, or Experiment Station Acknowledgement: ______________ Date: ______________

Educational Communications Acknowledgement: ______________ Date: ______________