

Podcaster-in-Residence Application Form
Application to be considered for one-on-one podcasting support

Name: _____

Email: _____

Address: _____
(street)

(city)

(postal code)

Phone: _____

Do you currently have a Podcast? Yes No

If so what is the title/platform: _____

What is your podcasting skill level?

Beginner (no experience)

Intermediate (some experience recording, editing and publishing)

Advanced (I have my own show/have worked on a show)

If applicable, what recording software have you used: _____

What skills are you interested in developing?

Recording

Editing

Publishing

Interviewing

Being a guest on other shows

Other _____

In **50 words or less**, describe your interest in podcasting.

Please provide some background about your experience and expectations.

1. If you have a podcast, what are you happiest with, in your content? For example, it could be a particular interview, or a technical aspect like "I like the way I edited this episode".

2. What aspect of podcasting, or recording general, do you find most challenging or difficult?

3. What are your goals as a podcaster?

4. What do you hope to learn from your time with Sara Geidlinger?