

O-1/O-2 CONSULTATION LETTER REQUEST FORM

Please include this completed form as the top page of your submission packet. Incomplete submissions will not be processed (i.e., those containing blanks or stating “see deal memo”). **Prior to submitting your request for a consultation letter, closely review all the information posted [here](#). All information submitted will be collected pursuant to our [Privacy Policy](#).**

GENERAL INFO

1. **Name of petitioner** as it appears on I-129 form:
2. **Name of beneficiary** as it appears on I-129 form:
3. **Beneficiary's email address:**
4. **The entire length of time requested for the visa (as indicated on the I-129 form):**
5. **Visa Type (select):**
 - ☐ O-1
 - ☐ O-2, based upon:
 - ☐ long-standing working relationship with the O-1 beneficiary
 - ☐ continuity of production inside and outside of the U.S.
6. Has the beneficiary **previously received an O-1 or an O-2 consultation letter** from the PGA?
 - ☐ Yes, on this date:
 - ☐ No
7. Is the **beneficiary a PGA member**?
 - ☐ Yes
 - ☐ No
8. **IMDb page of beneficiary** (if available):

DETAILS OF PRODUCTION(S) (If applying for a visa for more than one project, please include below the information for **each** project)

9. **Title of production(s):**
10. **Credited role(s)** (i.e. Producer, Executive Producer, etc.):
11. **Medium of production(s)** (select one and/or specify if more than one production): ☐ Motion Picture ☐ Television ☐ Other, please specify:
12. **Start date of employment** for each production:
13. **End date of employment** for each production:

14. **Location of employment** (city and/or state) for each production:

FOR O-2s ONLY

IF VISA IS BASED ON A LONG-STANDING WORKING RELATIONSHIP WITH THE O-1 BENEFICIARY, PLEASE ANSWER THE QUESTIONS BELOW:

15. Describe the **long standing nature of the relationship** that the O-2 beneficiary has with the O-1 principal:

16. Specify the **approximate number of productions on which the O-2 beneficiary has worked in collaboration with the O-1 principal**:

17. List the **names of the productions and describe how the O-2 beneficiary worked with the O-1 beneficiary on each production** (confirm that the productions are also listed below in the RECORD OF EXTRAORDINARY ACHIEVEMENT):

IF VISA IS BASED ON CONTINUITY OF A PRODUCTION OUTSIDE AND WITHIN THE UNITED STATES, PLEASE ANSWER THE QUESTIONS BELOW:

18. Is the O-2 beneficiary **continuing employment on a production** that has filmed outside of the U.S.?

☐ Yes, the production has filmed in these locations (please list all):

☐ No

19. What is **O-2 beneficiary's credit in the production**?

20. Approximately **how much of the production has been completed**? (As part of your response, please include evidence of both the work completed to date and the production activities that are still outstanding.)

RECORD OF EXTRAORDINARY ACHIEVEMENT

Please provide a list of all the **beneficiary's producing credits on their commercially released projects from the last ten (10) years**. If you need to list additional projects, please include extra pages as necessary.

1. Title of the Project/Production:

- a. **Year of release/launch:**
- b. **Credit received:**
- c. **Format** (e.g. feature film, TV Drama Series, Video Game, etc.):
- d. **Number of Episodes** (if applicable to the Format):
- e. **Running Time** (if applicable to the Format):
- f. **URL** (if available):
- g. **Distribution/exhibition method(s)** of how consumer audiences view or experience your work (e.g. theatrical, streaming platform, broadcast, console, etc):
- h. **Distribution Companies** (List all companies, entities, and platforms involved in the distribution, broadcast, and exhibition of the project):
- i. **Commercial Statistics** (Include the geographic reach and any statistical information that demonstrates the scale and scope of distribution in the commercial market; ex: If a theatrical release, include the number of theaters and duration of the run)(Note: Beneficiary is responsible for including reputable third-party evidence of existence, scale and scope of distribution):
- j. **What makes the achievement extraordinary?** (e.g. licensed the p.g.a. mark, award-winning)

2. Title of the Project/Production:

- a. **Year of release/launch:**
- b. **Credit received:**

- c. **Format** (e.g. feature film, TV Drama Series, Video Game, etc.):
- d. **Number of Episodes** (if applicable to the Format):
- e. **Running Time** (if applicable to the Format):
- f. **URL** (if available):
- g. **Distribution/exhibition method(s)** of how consumer audiences view or experience your work (e.g. theatrical, streaming platform, broadcast, console, etc):
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- j. **What makes the achievement extraordinary?** (e.g. licensed the p.g.a. mark, award-winning)

3. **Title of the Project/Production:**

- a. **Year of release/launch:**
- b. **Credit received:**
- c. **Format** (e.g. feature film, TV Drama Series, Video Game, etc.):
- d. **Number of Episodes** (if applicable to the Format):
- e. **Running Time** (if applicable to the Format):
- f. **URL** (if available):
- g. **Distribution/exhibition method(s)** of how consumer audiences view or experience your work (e.g. theatrical, streaming platform, broadcast, console, etc):

- h. **Distribution Companies** (List all companies, entities, and platforms involved in the distribution, broadcast, and exhibition of the project):
- i. **Commercial Statistics** (Include the geographic reach and any statistical information that demonstrates the scale and scope of distribution in the commercial market; ex: If a theatrical release, include the number of theaters and duration of the run)(Note: Beneficiary is responsible for including reputable third-party evidence of existence, scale and scope of distribution):
- j. **What makes the achievement extraordinary?** (e.g. licensed the p.g.a. mark, award-winning)

4. **Title of the Project/Production:**

- a. **Year of release/launch:**
- b. **Credit received:**
- c. **Format** (e.g. feature film, TV Drama Series, Video Game, etc.):
- d. **Number of Episodes** (if applicable to the Format):
- e. **Running Time** (if applicable to the Format):
- f. **URL** (if available):
- g. **Distribution/exhibition method(s)** of how consumer audiences view or experience your work (e.g. theatrical, streaming platform, broadcast, console, etc):
- h. **Distribution Companies** (List all companies, entities, and platforms involved in the distribution, broadcast, and exhibition of the project):
- i. **Commercial Statistics** (Include the geographic reach and any statistical information that demonstrates the scale and scope of distribution in the commercial market; ex: If a theatrical release, include the number of theaters and duration of the run)(Note: Beneficiary is responsible for including reputable third-party evidence of existence, scale and scope of distribution):

j. **What makes the achievement extraordinary?** (e.g. licensed the p.g.a. mark, award-winning)

5. **Title of the Project/Production:**

a. **Year of release/launch:**

b. **Credit received:**

c. **Format** (e.g. feature film, TV Drama Series, Video Game, etc.):

d. **Number of Episodes** (if applicable to the Format):

e. **Running Time** (if applicable to the Format):

f. **URL** (if available):

g. **Distribution/exhibition method(s)** of how consumer audiences view or experience your work (e.g. theatrical, streaming platform, broadcast, console, etc):

h. **Distribution Companies** (List all companies, entities, and platforms involved in the distribution, broadcast, and exhibition of the project):

i. **Commercial Statistics** (Include the geographic reach and any statistical information that demonstrates the scale and scope of distribution in the commercial market; ex: If a theatrical release, include the number of theaters and duration of the run)(Note: Beneficiary is responsible for including reputable third-party evidence of existence, scale and scope of distribution):

j. **What makes the achievement extraordinary?** (e.g. licensed the p.g.a. mark, award-winning)

By signing below, I certify that the foregoing statements are true and complete to the best of my knowledge and belief.

Signature: _____

Print Name: _____

Date Signed: _____

Signed by (select): ☐ Petitioner ☐ Employer (check both if petitioner is the employer) ☐ Other, please specify: