

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0007268832
 File Number:
 0000072973
 Submit Date:
 05/20/2019
 Call Sign:
 WMUL
 Facility ID:
 66564
 City:

 HUNTINGTON
 State:
 WV

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 05/20/2019
 Filing Status:
 Active

General Information	Section	Question	Response
	Application Description	Description of the application (255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.	WMUL - EEO 2019
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
MARSHALL UNIVERSITY BOARD OF GOVERNORS Doing Business As: MARSHALL UNIVERSITY BOARD OF GOVERNORS	Dr. Chuck G. Bailey RADIO STATION WMUL, MARSHALL UNIVERSITY ONE JOHN MARSHALL DRIVE HUNTINGTON, WV 25755 United States	+1 (304) 696-2294	BAILEYCG@MARSHALL. EDU	GOE

Contact Representatives	Contact Name	Address		Phone	Em	nail	Contact Type
	JOHN J MULLANEY CONSULTING ENGINEER MULLANEY ENGINEERING, INC.	MULLANEY ENGINEERII 9049 SHADY COURT GAITHERSB 20877 United States	( GROVE BURG, MD	+1 (301) 92 0115		ULLANEY@MULLENGR. OM	Technical Representative
	Aaron P Shainis FCC Legal Counsel Shainis & Peltzman, Chartered	Aaron P. Sha 1850 M ST. N Suite 240 Washington, United States	NW DC 20036	+1 (202) 29 0567	3- aa	iron@s-plaw.com	Legal Representative
Common	Facility Identifier	Call Sign	City		State	Time Brokerage Agree	ement
Stations	66564	WMUL	HUNTINGT	ON	WV	No	
Program Report Questions	Section	Question				Response	9

Discrimination Complaints	Have any pending or resolved complaints been filed during this license term before any body having competent jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in the employment practices of the station(s)?	No
Full-time Employees	Does your station employment unit employ fewer than five full-time employees? Consider as "full-time" employees all those permanently working 30 or more hours a week?	Yes

## Certification

## Question

Response

The undersigned certifies that he or she is (a) the party filing the report, or an officer, director, member, partner, trustee, authorized employee, or other individual or duly elected or appointed official who is authorized to sign on behalf of the party filing the report; or (b) an attorney qualified to practice before the Commission under 47 C.F. R. Section 1.23(a), who is authorized to represent the party filing the report, and who further certifies that he or she has read the document; that to the best of his or her knowledge, information, and belief there is good ground to support it; and that it is not interposed for delay	
Certified Date	05/20 /2019
Certified Title	President
Authorized Party Name	James A. Gilbert

Attachments

No Attachments.