

# Broadcast Equal Employment Opportunity Program Report

FRN: 0002144434 City: CHARLESTON	1	: 0000115644 Submit	Date: 06/01/2020	Call Sign: WCHS-TV Fa	cility ID: <b>71280</b>
Service: Full Service T Active	felevision	Purpose: EEO Report	Status: Received	Status Date: 06/01/2020	Filing Status:

General	Section	Question	Response	
Information	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes	

### Licensee Information

## Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WCHS LICENSEE, LLC Doing Business As: WCHS LICENSEE, LLC	Miles S. Mason, Esq. Pillsbury Winthrop Shaw Pittman LLP 1200 Seventeenth Street, NW Washington, DC 20036 United States	+1 (202) 663- 8195	miles. mason@pillsburylaw. com	LLC

Contact Representatives	<b>Contact Name</b> Miles S. Mason , Esq . FCC Counsel Pillsbury Winthrop Shaw Pittman LLP	Street, Washi	Seventeenth	<b>Phone</b> +1 (202) 663- 8195	Email miles. mason@pillsb	urylaw.com	Contact Type Legal Representative	
Common Stations	Facility Identifier 71280	Call Sign WCHS-TV	<b>City</b> CHARLEST			kerage Agre	ement	
Program Report Questions	Section Discrimination Complain	hts Have an this licer jurisdicti alleging	Question 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)?				9	
	Full-time Employees		Does your station employment unit employ fewer than five full-time employees? Consider as "full-time" employees all				No	

### Responsibility for Implementation

Additional Program Report Questions

# A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That official's name and title are:

those permanently working 30 or more hours a week?

	Name	Name Title						
	Sharon Pickeral			Director, Talent Acquisition				
ertification	Question					Response		
	partner, trustee, authorized authorized to sign on behall Commission under 47 C.F.F who further certifies that he	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	Certified Date						
	Certified Title	Certified Title						
	Authorized Party Name					Christoph S. Ripley		
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status			
	WCHS 2018-19 EEO Report.pdf	Applicant	EEO Public File Report	WCHS 2018-19 EEO Report	Done with Virus Scan and Conversion			
	WCHS 2019-20 EEO Report.pdf	Applicant	EEO Public File Report	WCHS_2019-20 EEO Report	Done with Virus Scan and Conversion			
	WCHS_EEO Complaints. pdf	Applicant	Discrimination Complaints	WCHS_EEO Complaints Done with Virus Scan a Conversion		Scan and/or		
	WCHS_Form 396 EEO	Applicant	Narrative	WCHS_Form 396 EEO	Done with Virus	Scan and/or		

Statement

Narrative

Conversion

Narrative.pdf