

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

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FRN: 0001538784 Fi	ile Number: 0000153342	Submit Date: 07/19/2	021 Call Sign: KZSC	Facility ID: 66310 City:
SANTA CRUZ State:	CA			
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 07/19/2021	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.	KZSC EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
Regents of the University of California	UCOP ITS Department 1111 Franklin Street Oakland, CA 94607 United States	+1 (510) 987- 0440	UC_FCC_Licenses@ucop. edu	GOE

Contact	Contact Name	Address	Phone	Email		Contact Type
Representatives	Barry S. Persh Gray Miller Persh LLP	2233 Wisconsin Ave., NW Suite 226 Washington, DC 20007 United States	+1 (202) 776- 2458	bpersh(com	@graymillerpersh.	Legal Representative
Common	Facility Identifier	Call Sign Cit	y	State	Time Brokerage Ag	greement
Stations	66210	K780 8/		C 4	No	

SANTA CRUZ

CA

No

KZSC

Program Report Questions	Section	Question	Response
	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)?	Yes
	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

66310

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	07/19 /2021	
Certified Title	Executive Vice President and Chief Operating Officer	
Authorized Party Name	Rachael Nava	

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
KZSC FCC 396 EEO Discrimination	Applicant	Discrimination	Discrimination	Done with Virus Scan and/or
Complaint.pdf		Complaints	Complaint	Conversion