

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: 0003309465 | File Number: 0000184518 | Submit Date: 02/07/2022 | Call Sign: WWFM | Facility ID: 41194 | City

TRENTON State: NJ

Service: Full Power FM Purpose: EEO Report Status: Received Status Date: 02/07/2022 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.	2022 EEO Program Report (WWFM, WWNJ, WWCJ)
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
Mercer County Community College	1200 Old Trenton Road West Windsor, NJ 08550 United States	+1 (609) 570- 3703	weissa@mccc. edu	PNE

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Aaron P Shainis	1850 M St NW	+1 (202) 293-0567	aaron@s-plaw.com	Legal Representative
Legal Counsel	Suite 240			
Shainis & Peltzman, Chartered	Washington, DC 20036			
	United States			

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
41201	WWCJ	CAPE MAY	NJ	No
41194	WWFM	TRENTON	NJ	No
41203	WWNJ	TOMS RIVER TOWNSHIP	NJ	No

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)?	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?	No

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:

Name	Title
Alice Weiss	Station Manager

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	02/07 /2022
Certified Title	MCCC President
Authorized Party Name	Jianping Wang

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Narrative Statement.pdf	Applicant	Narrative Statement	Narrative statement	Done with Virus Scan and/or Conversion
EEO REPORT 2020.pdf	Applicant	EEO Public File Report	2020 Public File Report	Done with Virus Scan and/or Conversion
EEO REPORT 2021.pdf	Applicant	EEO Public File Report	2021 Public File Report	Done with Virus Scan and/or Conversion