No Attachments.

(REFERENCE COPY - Not for submission) Broadcast Equal Employment Opportunity Program Report

FRN: 0009038282	File Number: 0000073222		Submit Date: 05/24/2019	Call Sign: WSHC	Facility ID: 71678 City:	
SHEPHERDST	OWN	State: WV				
Service: Full Power	·FM	Purpose: EEO Repor	t Status: Received	Status Date: 05/24/2019	9 Filing Status: Active	

C 1	Section	Question	Question				Response					
General Information	Application Description	visible only to	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.				EEO Report for WSHC					
	Attachments		Are attachments (other than associated schedules) being filed with this application?					No				
Licensee	Licensee Name, Type a	Licensee Name, Type and Contact Information										
Information	Applicant	Applicant			Phone Email Applican Type			Applicant Type				
	SHEPHERD UNIVER OF GOVERNORS	SITY BOARD	RADIO M PO Box 5	1ANAGER 000	+1 (304)	APERI	DUE@SHEPHERD. GOE					
	Doing Business As: SHI UNIVERSITY BOARD GOVERNORS		SHEPHEI WV 2544	RDSTOWN, 3	876-5293	EDU						
	GOVERNORD		United Sta	United States								
Contact	Contact Name	Address		Phone	Emai	l		Contact Type				
Representatives	KENNETH ALAN PERDUE	GENERAL COUPO Box 5000	UNSEL									
	GENERAL COUNSEL		+1 (304) 876- APER SHEPHERDSTOWN, WV 5289 EDU		RDUE@S	E@SHEPHERD. Legal Representative						
	SHEPHERD UNIVERSITY	25443	, , , , , , , , , , , , , , , , , , ,									
		United States										
Common	Facility Identifier Call Sign City State Time Brokerage Agreement 71678 WSHC SHEPHERDSTOWN WV No											
Stations	Section	Question					Response					
	Program Report Questions Discrimination Complaints	estions Discrimination during this lice			y having ate, territor tion in the	No						
	Full-time Employees	five full-time employees all	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					
Cartification	Question							Response				
Certification	partner, trustee, authorized to sign on be the Commission under 4 report, and who further of the commission who further of the commission who further of the commission who sign the commission who sign the commission who sign that the commission where the commission which the c	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 Title	Certified Title						GENERAL COUNSEL kENNETH				
	Authorized Party Name	Authorized Party Name										

PERDUE

