

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0024665291
 File Number:
 0000079724
 Submit Date:
 08/01/2019
 Call Sign:
 WUNC
 Facility ID:
 66581
 City:

 CHAPEL HILL
 State:
 NC

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 08/01/2019
 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.	WUNC - EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
WUNC PUBLIC RADIO, LLC Doing Business As: WUNC PUBLIC RADIO, LLC	CAMPUS BOX 0915 120 FRIDAY CENTER DRIVE CHAPEL HILL, NC 27517 United States	+1 (919) 445- 9150	WUNC@WUNC. ORG	GOE

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Stephen Hartzell Brooks, Pierce et al.	150 Fayetteville Suite 1700 Raleigh, NC 276 United States		00 shartzell@brookspi	erce.com Legal Representative
	Marcus W. Trathen Brooks, Pierce et al.	150 Fayetteville Suite 1700 Raleigh, NC 276 United States		00 mtrathen@brooksp	ierce.com Legal Representative
Common	Facility Identifier	Call Sign	City	State Time Bro	okerage Agreement
Stations	66581	WUNC	CHAPEL HILL	NC No	
Program Report	Section	Questic	'n		Response
Questions	Discrimination Com	this lice jurisdict alleging	ny pending or resolved co nse term before any body ion under federal, state, to unlawful discrimination ir tation(s)?		
	Full-time Employees	full-time	our station employment ur employees? Consider as ermanently working 30 or	No	

Additional Program Report Questions	Responsibility for Implementation 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		
	Connie Walker	President and General Manager		
Certification	Question		Response	
	trustee, authorized employee, or other ind on behalf of the party filing the report; or ( F.R. Section 1.23(a), who is authorized to	s (a) the party filing the report, or an officer, director, member, partner, iividual or duly elected or appointed official who is authorized to sign b) an attorney qualified to practice before the Commission under 47 C. represent the party filing the report, and who further certifies that he best of his or her knowledge, information, and belief there is good posed for delay		
	Certified Date		08/01 /2019	
	Certified Title		President and General Manager	
	Authorized Party Name		Connie Walker	

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2018 Public File Report.pdf	Applicant	EEO Public File Report	2018 Public File Report	Done with Virus Scan and/or Conversion
2019 Public File Report.pdf	Applicant	EEO Public File Report	2019 Public File Report	Done with Virus Scan and/or Conversion
EEO Discrimination Complaint.pdf	Applicant	Discrimination Complaints	Discrimination Complaint	Done with Virus Scan and/or Conversion
EEO Narrative Statement. pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion