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

 FRN:
 0005099833
 File Number:
 0000124011
 Submit Date:
 10/05/2020
 Call Sign:
 KWAR
 Facility ID:
 90974
 City:

 WAVERLY
 State:
 IA

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 10/05/2020
 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.Schedule 396 - Bro EEO Program Rep Wartburg College - (FM)					Report -
		Attachments		Are attachments (other than associated schedules) being No				No	
				filed with this application?					
Licensee		Licensee Name, Type and Contact Information							
Information		Applicant		Address		Phone	Email Appl Type		Applicant Type
				100 WARTBU BLVD.	JRG				
		WARTBURG COLLEGE		WAVERLY, I	A 50677	+1 (319) 352- 8276	lucas.wendlan edu	d@wartburg.	PNE
				United States					
Contact		Contact Name	Addres	S	Phone	Email		Contact Ty	pe
Representatives		1000 Potomac St. NW							
_		Melodie A. Virtue	Suite 20					esentative	
		Foster Garvey PC	Washin	gton, DC 20007					
		Poster Garvey FC	United S						
		Facility Identifie							
Common		90974		WAVERLY		ne brokerage rigi	cement		
Stations		Section		Question				Response	
		ram Report		Have any pen		olved complaints b			
		stions Discrimination Complaints		during this license term before any body having competent jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in theNo					
				employment practices of the station(s)?					
		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	
		Question		1				1	Response
Certification		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							the
		Certified Date						10/05 /2020	
		Certified Title						/2020 President	
									Darrel
		Authorized Party	Name						D. Colson
Attachments		No Attachments.							COISOI