

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

FRN: 0014049605	File Number: 0000190916	Submit Date: 05/17/2	2022 Call Sign: WKKL	Facility ID: 8572 City:
WEST BARNSTABL	E State: MA			
Service: Full Power FI	M Purpose: EEO Report	Status: Received	Status Date: 05/17/2022	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.	Completed Form 396
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
CAPE COD COMMUNITY COLLEGE Doing Business As: Cape Cod Community College	Christopher Clark 2240 Iyannough Road West Barnstable, MA 02668 United States	+1 (774) 330- 4303	cclark@capecod. edu	GOE

Contact Representatives	Contact Name	Α	Address	Phone	Em	ail	Contact Type
	Christopher Clark VP for Finance and Operations CAPE COD COMMUNITY COLLEGE	2 V Y N	Christopher Clark 2240 IYANNOUGH ROAD WEST BARNSTABLE, MA 02668 United States	+1 (774) 330- 4303	ccl edi	ark@capecod. u	VP for Finance & Operations
	Lisa Zinsius Faculty Supervisor of WK Cape Cod Community Co	KL 2 ollege V 0	Lisa Zinsius 2240 Iyannough Road West Barnstable, MA 02668 United States	+1 (774) 330- 4440	lzir edi	nsius@capecod. u	Faculty Supervisor of WKKL
Common Stations	Facility Identifier	Call Sig			tate	Time Brokerag	e Agreement
	8572	WKKL	WEST BARNSTAB	LE	1A	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	No
		jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in the 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			
Certification	Question		Response			
	partner, trustee, authorized authorized to sign on behalf Commission under 47 C.F.F who further certifies that he	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 Title		05/17/202: VP Finance and Operations Cape Cod Communit College			
	Authorized Party Name		Christophe Clark			

## Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Report for 2013.pdf	Applicant	EEO Public File Report	EEO Report for 2013	Done with Virus Scan and/or Conversion
Narrative Statement may 13 2022 EEO.docx	Applicant	Narrative Statement	Narrative Report on EEO	Done with Virus Scan and/or Conversion