

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0001526086** | File Number: **0000212176** | Submit Date: **03/07/2023** | Call Sign: **KVCR-DT** | Facility ID: **58795**
 City: **SAN BERNARDINO** | State: **CA**
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **03/07/2023** | Filing Status: **Active**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
SAN BERNARDINO COMMUNITY COLLEGE DISTRICT Doing Business As: SAN BERNARDINO COMMUNITY COLLEGE DISTRICT	Jose F. Torres 550 E. Hospitality Lane Suite 200 SAN BERNARDINO, CA 92408 United States	+1 (909) 388-6901	jtorres@sbccd.cc.ca.us	GOE

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Michael Bennet Womble Bond Dickinson (US) LLP	2001 K Street, NW, Suite 400 South Washington, DC 20006 United States	+1 (202) 857-4442	michael.bennet@wbd-us.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
130845	KJHP-LD	MORONGO VALLEY	CA	No
58794	KVCR	SAN BERNARDINO	CA	No
58795	KVCR-DT	SAN BERNARDINO	CA	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

Responsibility for Implementation

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
Kristina Hannon	Vice Chancellor HR

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	03/07/2023
Certified Title	Executive Vice Chancellor, San Bernardino Community College District
Authorized Party Name	Jose Torres

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>kvcr_tv_eeo_2020-2021.docx</u>	Applicant	EEO Public File Report	2020-21 EEO Public File Report	Done with Virus Scan and/or Conversion
<u>kvcr_tv_eeo_2021-2022.docx</u>	Applicant	EEO Public File Report	2021-22 EEO Public File Report	Done with Virus Scan and/or Conversion
<u>Nature of Amendment.docx</u>	Applicant	All Purpose	Nature of Amendment	Done with Virus Scan and/or Conversion
<u>SBCCD Narrative Statement.docx</u>	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion