

Broadcast Equal Employment Opportunity **Program Report**

Submit Date: 03/26/2021 Call Sign: KSAU Facility ID: 63249 City: FRN: 0007209133 File Number: 0000141130 NACOGDOCHES State: TX Status Date: 03/26/2021 Service: Full Power FM Purpose: EEO Report Status: Submitted 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.	EEO License Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Name, Type and Contact Information

KSAU

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
State of Texas-Stephen F. Austin State University Doing Business As: STEPHEN F. AUSTIN STATE UNIVERSITY	P. O. BOX 13048 NACOGDOCHES, TX 75962 United States	+1 (936) 468- 1278	swilliford@sfasu. edu	Company

Contact Representatives	Contact Name		Address	Phone	Email	Contact Type
	SHERRY Williford KSAU General Manager STEPHEN F. AUSTIN ST UNIVERSITY	ATE	PO Box 13048 Nacogdoches, TX 75962 United States	+1 (936) 468- 1278	SWILLIFORD@SFASU. EDU	Legal Representative
Common	Facility Identifier	Call Sign	City	State	Time Brokerage Agre	ement
Stations	62240	KOALI			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?	Yes

NACOGDOCHES

ТΧ

No

Certification

63249

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	03/26 /2021
Certified Title	KSAU General Manager
Authorized Party Name	Sherry Williford

Attachments

No Attachments.