



GOLDEN VALLEY COMMUNITY BROADCASTERS
KZFR COMMUNITY RADIO 90.1 FM
341 Broadway, Suite 411, Chico, CA, 95928
KZFR.org

APPLICATION FOR MEMBERSHIP ON THE PROGRAM COMMITTEE

This form shall serve as an application for persons wanting to be considered for nomination to membership on the KZFR Program Committee.

Name: _____ Date: _____

Address: _____

Phone: (Primary) _____ (Secondary) _____

Email: _____

PLEASE TELL US ABOUT YOURSELF:

REASON FOR APPLYING:

WHAT DO YOU KNOW ABOUT KZFR?

WHAT SKILLS OR BACKGROUND CAN YOU BRING TO THE SELECTION AND EVALUATION OF KZFR PROGRAMMING?

HOW DID YOU HEAR ABOUT THE PROGRAM COMMITTEE?

- Social Media, if so which platform: _____
- KZFR Email Newsletter
- Other: _____
- On-Air
- From a friend or listener

WHAT ARE YOUR 3 FAVORITE PROGRAMS ON KZFR?

-
-
-

Please provide references 3 personal/professional references

- Name: _____ Relationship: _____ Email: _____
- Name: _____ Relationship: _____ Email: _____
- Name: _____ Relationship: _____ Email: _____

<p><u>FOR OFFICE USE ONLY:</u></p> <p>BOARD ELECTED SEAT: <input type="checkbox"/></p> <p>PROGRAMMER ELECTED SEAT: <input type="checkbox"/></p>
