

**BLUEBERRY BROADCASTING LLC, EEO PROGRAM  
COMMUNITY ORGANIZATION NOTIFICATION REQUEST FORM**

Date \_\_\_\_\_

I. GENERAL INFORMATION (Please complete all sections)

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code : \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Name of Contact Person/Title: \_\_\_\_\_

Type of Organization: \_\_\_\_\_

II. CATEGORIES OF JOB VACANCIES

Community organizations may request notice of all vacancies, or only those in specific categories. Please indicate what category(s) of job vacancy notices you would like to receive. **(Please select your preferences)**

- |                                |                            |                                       |
|--------------------------------|----------------------------|---------------------------------------|
| _____ <b>All Job Vacancies</b> | _____ <b>Sales Workers</b> | _____ <b>Officials &amp; Managers</b> |
| _____ Craft Workers (Skilled)  | _____ Professionals        | _____ Operators (Semi Skilled)        |
| _____ Technicians              | _____ Laborers (Unskilled) | _____ Office & Clerical               |
| _____ Service Workers          |                            |                                       |

PRIVACY NOTICE: The Federal Communications Commission (FCC) requires all stations to report the names of community organizations requesting job vacancy information plus the contact person, address and telephone number of each organization in an annual EEO Public File Report that will be made available to the general public in the station's public inspection file and on its website. **By requesting to be notified of job vacancies, you consent to the public disclosure of this information as required by the FCC.**

Please return the completed form via e-mail, fax or regular mail to:  
Blueberry Broadcasting LLC  
125 Community Drive Ste. 201  
Augusta, ME 04330  
(fax) 207.623.9007  
Blueberry Broadcasting LLC is an Equal Opportunity Employer.



**For Internal Use Only:**

Date Received by Station: \_\_\_\_\_ Name of Station Personnel Processing Info: \_\_\_\_\_

Mode of Delivery: \_\_\_\_\_ E-mail \_\_\_\_\_ U.S. Mail \_\_\_\_\_ Fax \_\_\_\_\_ Telephone \_\_\_\_\_ Other: \_\_\_\_\_

Primary Notification Selected for Vacancies: \_\_\_\_\_

Cancellation of Notice Date: \_\_\_\_\_ Contact Person for Cancellation: \_\_\_\_\_