Federal Communications Commission Washington, D.C. 20554			Approved by OMB 3060-0113 (March 2003)	FOR FCC USE ONLY	7
g,	FCC		,		
BROADCAST EQUA PRO (To be filed with b	L EMPI OGRAM	FOR COMMISSION FILE NO. B396 - 20121			
Read INSTRI	JCTIONS F	Before Filling Out Fo	orm		
ection I					
egal Name of the Licensee AUGUSTANA COLLEGE AS	SSOCIATIO	ON			
Mailing Address ATTN. BOB PRELOGER 2001 S. SUMMIT AVE					
City			State or Country (i	f foreign address)	Zip Code 57197 -
SIOUX FALLS [Felephone Number (include area code)			SD E-Mail Address (if available)		β/19/-
5052745471			FCCFILING@MP		
		Facility ID Nu 3239	ımber		Call Sign KAUR
TYPE OF BROADCAST	Comme	ercial Broadcast Sta	tion	Noncommercial	Broadcast Station
STATION:	O Rac	dio		• Educational	Radio
if applicable)	O TV			C Educational	ΓV
	C Lov	w Power TV			
	O Inte	ernational			
also list stations operated by perated pursuant to a time br greement on this report, resp	all stations the license cokerage ag conses or in okered stati	e pursuant to a time reement. To the exte formation provided tons, as well as any	brokerage agreeme nt that licensees inc in Sections I throug other stations, inclu	nt. Indicate on the clude stations ope th II should take in uded on this form.	s that share one or more employed table below which stations are rated pursuant to a time brokerage no consideration the licensee's For purposes of this form, a station at least one employee.
			Station List		
Also list stations operated by operated pursuant to a time bugreement on this report, res	y the licens rokerage ag ponses sho ncluded on	greement. To the extended take into consideration form. For purp	ne brokerage agreet ent that licensees in deration the license oses of this form,	ment. Indicate on aclude stations op e's EEO complia	s that share one or more employee the table below which stations a serated pursuant to a time brokera ance efforts at brokered stations, ment unit is a station or a group
0.11.01	lumber	Type (check applicable		ocation (ity/State)	Time Brokerage Agreement (check applicable box)
Call Sign Facility ID N		0 6 /	SIOUS	X FALLS, SD	0 6
Call Sign Facility ID N KAUR 3239		C _{AM} ⊙ _{FM} (IV BIGG	ATALLS, SD	C Yes O No
			IV BIOCE	TALLS, SD	Yes No

1 of 3

11/19/2012

JOHN CRIGLER			1000 POTOMAC STREET NW 5TH FLOOR			
City WASHINGTON	State DC	Zip Code 20007-	Telephone Number 2022982521			
FILING INSTRUCTIONS						
discriminating in employme Section 73.2080. Pursuant t full-time station employees employs fewer than five ful employment unit is filing a GA copy of this report must be these requirements may resu	ent and related be to these requirer must file a report time employed combined report the kept in the stault in sanctions of	penefits on the basis of ments, a license renew port of its activities to e es, no equal employment, a copy of the report ation's public file. The port license renewal be	ment opportunity to all qualified persons a frace, color, national origin, religion, and val applicant whose station employment to ensure equal employment opportunity. If a ent opportunity program information need must be filed with each station's renewal ese actions are required to obtain license ing delayed or denied. These requirement	d sex. See 47 C.F.R. unit employs five or more a station employment unit d be filed. If a station l application. renewal. Failure to meet		
DISCRIMINATION COMF	PLAINTS. Have ly having compe	any pending or resolutent jurisdiction unde	ns Act of 1934, as amended. ved complaints been filed during this or federal, state, territorial or local law, the station(s)?	C Yes • No		
If so, provide a brief description of the complaint(s), including the persons involved, the date of the filing, the court or agency, the file number (if any), and the disposition or current status of the matter.						
[Exhibit 1]						
Does your station employm	Does your station employment unit employ fewer than five full-time employees? • Yes • No					
Consider as "full-time" employees all those permanently working 30 or more hours a week.						
If your station employment unit employs fewer than five full-time employees, complete the certification below, return the form to the FCC, and place a copy in your station(s) public file. You do not have to complete the rest of this form. If your station employment unit employs five or more full-time employees, you must complete all of this form and follow all instructions.						
CERTIFICATION.						
This report must be certified	d, as follows:					
A. By licensee, if an individ B. By a partner, if a partner C. By an officer, if a corpor D. By an attorney of the lice	ship (general paration or an asso	ociation; or	tnership); or absence from the United States of the li	censee.		
WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).						
	knowledge, inf	formation and belief,	all statements contained in this report	are true and correct.		
Signed			Name of Respondent ROBERT OLIVER			
Title PRESIDENT			Telephone No. (include area code) 6052740770			
Date						

The purpose of this document is to provide broadcast licensees, the FCC, and the public with information about whether the

2 of 3 11/20/2012 7:52 AM

station is meeting equal employment opportunity requirements.

GENERAL POLICY

A broadcast station must provide equal employment opportunity to all qualified individuals without regard to their race, color, national origin, religion or sex in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination.

RESPONSIBILITY FOR IMPLEMENTATION

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: JANE KUPER	Title: VP FOR HUMAN RESOURCES

It is also the responsibility of all persons at a broadcast station making employment decisions with respect to recruitment, evaluation, selection, promotion, compensation, training and termination of employees to ensure that no person is discriminated against in employment because of race, color, religion, national origin or sex.

I. EEO PUBLIC FILE REPORT Attach as an exhibit one copy of each of the EEO public file reports from the previous two years. Stations are required to place annually such information as is required by 47 C.F.R. Section 73.2080 in their public files.	[Exhibit 2]
II. NARRATIVE STATEMENT Provide a statement in an exhibit which demonstrates how the station achieved broad and inclusive outreach during the two-year period prior to filing this application. Stations that have experienced difficulties in their outreach efforts should explain.	[Exhibit 3]

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this report. We will use the information you provide to determine if the benefit requested is consistent with the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your request may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your request may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding. In addition, all information provided in this form will be available for public inspection. If you owe a past due debt to the federal government, any information you provide may also be disclosed to the Department of Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized. We have estimated that each response to this collection of information will average 5 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0113), Washington, D. C. 20554. We will also accept your comments via the Internet if you send them to jboley@fcc.gov. Remember - you are not required to respond to a collection of information sponsored by the Federal government,

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.

Exhibits

3 of 3