

WKUF-LP SHOW APPLICATION FORM

- New show hosts are required to complete a 30-day trial period weekdays from 8 am – 5 pm
- Community Members: Bring a sample tape or cd of your show and a completed Program Log when you meet with the Program Director.

FIRST & LAST NAME: _____

EMAIL: _____ PHONE # (____) _____



ALIAS (DJ, ARTIST, OR NICKNAME): _____

Student or Community (circle one) Class Standing: FR SPH JR SR # years of radio experience: _____

SHOW NAME: _____ GENRE: _____ (I.E. ROCK, HIP-HOP)

REQUESTED FREQUENCY OF YOUR SHOW: Weekly Bi-weekly

DETAILS OF REQUESTED SHOW:

WHY I FEEL I SHOULD BE GIVEN AIRTIME ON WKUF:

ADDITIONAL CAST MEMBERS: [list dj alias in parenthesis]

Additional cast members must complete all WKUF forms, be trained and station certified BEFORE being on WKUF air.

List at least 1 person (preferably 2) who will **SUBSTITUTE** to broadcast your show in the event of your absence. You are responsible within reason for the actions of your substitute(s). The substitute(s) must consent to all guidelines and receive approval from the Program Director prior to accepting this position. **SUBSTITUTE HOSTS** are required to complete training, and review & sign the station waivers and agreements.

(You must provide a phone # and email address for each person you list!)

1. _____ Email: _____ Phone # (____) _____

2. _____ Email: _____ Phone # (____) _____

You are responsible for being sure your show airs at the scheduled time. It's your responsibility to notify the Program Director via phone or email letting him know of your absence. Make sure that your substitute host is present in the event of your absence.

LIST TWO BUSINESS REFERENCES: (Include Name and Telephone Number)

REQUESTED SHOW SCHEDULE:

Select your desired time block(s) below. If you are a current show host requesting a time change, indicate your current time on the schedule and circle the time you'd like to switch to.

[NEW SHOWS: 8AM - 5PM DURING FOR THE 30-DAY TRIAL PERIOD]

KEY	TIME	MON	TUES	WED	THURS	FRI	SAT	SUN
1 = 1 ST CHOICE	6 AM							
	7 AM							
	8 AM							
2 = 2 ND CHOICE	9 AM							
	10 AM							
3 = 3 RD CHOICE	11 AM							
	12 PM							
ALL SHOWS MUST BROADCAST ONE HOUR <u>MINIMUM!</u>	1 PM							
	2 PM							
	3 PM							
	4 PM							
	5 PM							
	6 PM							
	7 PM							
	8 PM							
	9 PM							
	10 PM							
	11 PM							
	12 AM							
	1 AM							
	2 AM							
	3 AM							
	4 AM							
	5 AM							

EACH BLOCK REPRESENTS ONE HOUR

Thank you for applying for a show on WKUF. The officers of WKUF will review your application and arrange an interview for you. Once it has been determined that your show is a good fit on WKUF, the Program Director will contact you regarding your scheduled show time and to arrange training.

I _____ agree to and understand all terms and guidelines within this document and WKUF-LP. I will complete equipment training for studio access. In addition, I agree to sign the WKUF DJ Agreement which certifies that I have read and understand all terms, rules, and regulations within the WKUF handbook. Any fines charged to the station or the University on your behalf will be charged to you and therefore your responsibility to pay. By signing this document, I understand that I am joining WKUF-LP as a member, and will be required to participate in WKUF activities and events.

HOST SIGNATURE: ✕ _____ **DATE:** _____

AGREEMENT START DATE: _____ / _____ / _____
MONTH DAY YEAR

AGREEMENT EXPIRATION DATE: _____ / _____ / _____
MONTH DAY YEAR