



ON-AIR TIME AND SHOW APPLICATION

Date of application: ____/____/____

Name _____

Phone Number: _____ Email Address _____

Your radio experience (if any) _____

Suggested Show Name: _____

Desired time slot and day: _____ Second choice of time slot: _____

Show description: _____

What community need do you think this show would help fulfil? _____

What general demographic do you think the show would aim at? _____

Signature: _____