Federal Communic	ations Commission	· · · · · · · · · · · · · · · · · · ·	pproved by OMB	FOR FCC USE ONLY		
Washington, D.C.	20554	3060-01	13 (March 2003)			w
		FCC 396				
	PROG (To be filed with broad	MPLOYMENT OPPORT RAM REPORT deast license renewal application)	UNITY	FOR COMMISSION UNITED NO. B396 - 201402	4	
Section I	Read INSTRUCTI	ONS Before Filling Out Form			4	
Legal Name of	the Licensee					:
	OOL DISTRICT				•	
Mailing Addres 50 EARLY STI						
City MORRISTOW				State or Count NJ	try (if foreign address)	Zip Code 07960 -
Telephone Num 9732922300	ber (include area code			E-Mail Addre MCDADE@N	ss (if available) MSDK12,NET	
		Facility ID Number 43849				Call Sign WJSV
TYPE OF BR STATION: (if applicable)	OADCAST C	Commercial Broadcast Station Radio TV Low Power TV International		Noncommercial E  Educational R  Educational T	adio	
Application Pu  New Progr  Amendmen			.9			
stations operated time brokerage or information p as any other stat	d by the licensee pursu- agreement. To the extension of the extension of the extensions, included on this tame market that share	is included on this statement. List cant to a time brokerage agreement. In that licensees include stations op through II should take into consider form. For purposes of this form, a sat least one employee.	Indicate on the erated pursuar ration the licen	table below which to a time brokera see's EEO complia	n stations are operated pu ge agreement on this rep ance efforts at brokered s	rsuant to a ort, responses tations, as we
		Statio	n List			
stations operate time brokerage should take into	d by the licensee purs agreement. To the ext consideration the lice	ons included on this statement. List suant to a time brokerage agreement that licensees include stations of ensee's EEO compliance efforts at beyment unit is a station or a group	ent. Indicate o operated pursua orokered statio	n the table below vant to a time brokens, as well as any constants	which stations are operate rage agreement on this re other stations, included of	ed pursuant to eport, response n this form. Fo
Call Sign	Facility ID Number	Type (check applicable box)	<b>{ }</b>	ocation ity/State)	Time Brokerage A	
WJSV	43849	C AM G FM C TV	MORR	ISTOWN, NJ	C Yes C 1	
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CONTACT PE	RSON IF OTHER T	HAN LICENSEE				
Name			Street Address			
TIM MCDADE	}		50 EARLY STREET			

		J-mn-	
City	State	Zip Code	Telephone Number
	11	t	P
MORRISTOWN	NJ	N7060.	19732922300
MORGOTOMA	1112	07900-	9732922300

#### FILING INSTRUCTIONS

Broadcast station licensees are required to afford equal employment opportunity to all qualified persons and to refrain from discriminating in employment and related benefits on the basis of race, color, national origin, religion, and sex. See 47 C.F.R. Section 73.2080. Pursuant to these requirements, a license renewal applicant whose station employment unit employs five or more full-time station employees must file a report of its activities to ensure equal employment opportunity. If a station employment unit employs fewer than five full-time employees, no equal employment opportunity program information need be filed. If a station employment unit is filing a combined report, a copy of the report must be filed with each station's renewal application.

A copy of this report must be kept in the station's public file. These actions are required to obtain license renewal. Failure to meet these requirements may result in sanctions or license renewal being delayed or denied. These requirements are contained in 47 C.F.R. Section 73.2080 and are authorized by the Communications Act of 1934, as amended.

DISCRIMINATION COMPLAINTS. Have any pending or resolved complaints been filed during this license term C Yes No before any body having competent jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in the employment practices of the station(s)?

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 employment unit employ fewer than five full-time employees?

€ Yes C 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, as follows:

- A. By licensee, if an individual;
- B. By a partner, if a partnership (general partner, if a limited partnership);
- C. By an officer, if a corporation or an association; or
- D. By an attorney of the licensee, in case of physical disability or absence from the United States of the licensee.

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).

I certify to the best of my knowledge, information and belief, all statements contained in this report are true and correct.

Signed	Name of Respondent CHRISTINE A. KELLY
Title BUSINESS ADMINISTRATOR	Telephone No. (include area code) 9732922300
Date 02/28/2014	

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

Manage CHIDIOTENIE A REFLECT	The Discount of the Property o
Name: CHRISTINE A. KELLY	Title: BUSINESS ADMINISTRATOR

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	[Exhibit 2]
required to place annually such information as is required by 47 C.F.R. Section 73.2080 in their public files,	
II. NARRATIVE STATEMENT	A THE STATE OF THE
Provide a statement in an exhibit which demonstrates how the station achieved broad and inclusive outreach during	FPL-6364-23
the two-year period prior to filing this application. Stations that have experienced difficulties in their outreach efforts	[Exhibit 3]
should explain.	

#### 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**

https://licensing.fcc.gov/cgi-bin/ws.exe/prod/cdbs/forms/prod/cdbsmenu.hts?context=25&appn=101627497&formid=396&fac\_num=43849[7/10/2014 11:46:40 AM]