

**GACAA MASS MEDIA AWARD RADIO**

Name of Station \_\_\_\_\_ Address \_\_\_\_\_

Manager \_\_\_\_\_ Your Contact \_\_\_\_\_

1. How much coverage does your station give to Extension projects in these areas?

A. Spot Announcements Number per week \_\_\_\_\_

Air time per week \_\_\_\_\_

B. News Programs Number per week \_\_\_\_\_

Air time per week \_\_\_\_\_

C. Feature programs performed by Extension staff.

Number Amount of Air Time Daily \_\_\_\_\_

Weekly \_\_\_\_\_ Monthly \_\_\_\_\_

2. In 200 words or less, tell why the radio station being nominated should receive the GACAA Award. You might want to include a specific example of how this station has supported your Extension program. (Use another sheet if necessary.)

Your Name \_\_\_\_\_ Title \_\_\_\_\_

\_\_\_\_\_ County \_\_\_\_\_

\_\_\_\_\_

**DUE DATE: September 15, 2011**

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