

GACAA MASS MEDIA AWARD TELEVISION

Name of Station _____ Address _____ Manager _____
_____ Your Contact _____

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

A. Spot Announcements

(1) Public Service Announcements: Number per month _____ Time of Day _____

(1) Station Support of County Program: Number per month _____ Time of Day _____

A. News Programs Number per month _____ Time of Day _____

C. Local Extension Feature Programs Number per month _____ Time of Day _____

D. Special "Talk Shows" - Extension Participation (July 1 - June 30)

Number per month _____ Time of Day _____

D. Estimated total amount of air time for Extension Programs per year _____

2. In 200 words or less, tell why the T.V. 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, 2010

**MAIL TO: Johnny P. Whiddon, GACAA Vice President
400 East Courtland Ave
Quitman, GA 31643**

or

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