Hooray! I’ve finally made it to the airwaves. In becoming an on-air host, producer or programmer at WDSW-LP,

I ____________________________________________________________,

(Please print name)

accept the following responsibilities:

1. Arriving for my program at least 15 minutes before its start time.
2. Creating the best show possible by being prepared in advance and fulfilling WDSW-LP’s mandate to enrich the academic and cultural lives of Delta State’s listeners.
3. Adhering to all regulations and policies affecting my program, including content, hits, spoken word and new music requirements.
4. Never broadcasting material that is hateful, libelous, or slanderous in any other way; and not airing material that may be deemed offensive or obscene.
5. Respecting station equipment and completing and returning a report if something breaks or needs attention.
6. Completing log in sheets accurately and in a timely manner.
7. Finding appropriate fill-ins or producing pre-records for my show in the event of any absence, and informing Communications & Marketing directors of this; providing at least two weeks notice if there are any changes to my show (e.g., cancellation, format changes, new hosts etc.).
8. Understanding that WDSW-LP has the right to pre-empt a show for reasons including, but not limited to, sports, special programming, and technical maintenance.
9. Contributing at least three hours per month in non-programming time to WDSW-LP and being a member of the “Friends of Delta State Radio” program.
10. Taking responsibility for the behavior of my guests, on- and off-air.

I understand that all new shows and their members will be on a four-show probationary period, during which the program, upon the discretion of the Communications & Marketing directors, may be cancelled. I recognize that failure to fulfill my responsibilities as a programmer may result in my removal from WDSW-LP.

__________________________________________________________
Volunteer signature

__________________________________________________________
WDSW-LP Staff Signature

__________________________________________________________
Date