## WEFT Airshifter Orientation Training Application

Please type or print clearly		Data		
Name		Date Primary email		
Permanent Address				
Local Address				
Local phone	Ce	ell		
Work phone	Se	econdary email		
What is the best way to get in tou	ch with you?			
Why do you want to participate in	n WEFT airshifter t	raining? (check al	l that apply)	
□ Host a music show	□ Host a public	c affairs show	□ Host pre-recorded programming	
□ Assist other airshifters	□ Substitute ai	rshifter	□ Learn about community radio	
□ Want to get more involved	□ Other			
			about broadcasting?	
What times of the week are you u			ering and/or airshifting? Check all that	
apply. □ Weekends		□Weekda	y mornings (6-11:30am)	
□ Weekday afternoons (1	1:30am-6pm)	🗆 Weekda	ay evenings (6pm-12am)	
$\Box$ Overnights (2-6 am)				
<b>e ii</b>	U	-	the AOT program, nor does it guarantee	

a show slot. Submit completed applications online to airshiftertraining@weft.org or by mail to WEFT, attn: Vicki Niswander, 113 N. Market St., Champaign, IL 61820.

This section to be completed by trainers only							
Received date							
AOT Session 1 Date	Trainer	AOT Session 2 Date	Trainer				
IST Session 1 Date	Trainer	1ST Session 2 Date	Trainer				
Comments:							