



The Voice of Your Community

Heritage FM Inc
 PO Box 117 GOSNELLS WA 6990
 Phone: (08) 9398 3100
 www.hfm.radio

Studio Location: 43 Mills Road West, Gosnells

Program Application and Information Sheet

All aspiring broadcasters must fill out this program application form in as much detail as possible for approval by the Programming/Scheduling Committee, and Committee of Management (CoM) at 107.3HFM. All applicants need to be aware that if a show is approved it must fall within the rules and guidelines set out in the current Community Broadcasting Association of Australia Codes of Practice.

 Your Application should include the following:

- 1) This completed application form
- 2) A recording of a 1 hour section of the program you plan to put to air, (songs abbreviated)
- 3) A copy of your CV/Resume with any previous training/experience you may have
- 4) The name, address and contact details for your mentor if you are under 18

The Program Application Process is as follows:

- 1) Your application is received and sent to our Programming/Scheduling Committee for discussion
- 2) Your recording and program content when supplied, will be played and peer reviewed
- 3) You may be invited to a meeting with the Program committee
- 4) You will be advised of the committee's decision and the subsequent CoM decision.

This process can take two months to complete and then if successful you will enter into a three month training and probation period. Your progress will then be reviewed by the CoM and approval will be given or more training requested, before you are allowed to produce your show on air solo. # Please note that experienced presenters will still have an on-air probation review period of three months, before final approval is given for solo production of live to air programs.

IMPORTANT: Please post this form to the address below, or deliver in person to the studio, or scan and email to programming@hfm.radio or secretary@hfm.radio . No responsibility will be taken for forms that are not posted.

Place in envelope and POST
 to:

P/S Committee Chair
 Programming Scheduling Committee
 Heritage FM Inc
 PO Box 117
 GOSNELLS WA 6990

(Office Use Only):

Application Received	___/___/___	Application acknowledged	___/___/___
Entered into DB	___/___/___	Complies with Code of Practice:	Yes/No
Presented to C'tee	___/___/___	Application	Accepted / Held / Rejected
Presented to Board	___/___/___	Board of Management Endorsement:	Yes/No

Application for membership included (if applicable)

Program Application Form

Aspirant(s) names/contact details
(If more than three people involved please add details on a separate piece of paper.)

Applicant1

Name		D.O.B			
Postal Address					
Contact Details	Home				
	Mobile				
	Email				
Background Information: (Previous work in radio/journalism, relevant qualifications or experience in content area, references/referees)					
Are you aware of any disabilities that Heritage FM may have to accommodate? If yes, please advise.					

Applicant 2

Name		D.O.B			
Postal Address					
Contact Details	Home				
	Mobile				
	Email				
Background Information: (Previous work in radio/journalism, relevant qualifications or experience in content area, references/referees)					
Are you aware of any disabilities that Heritage FM may have to accommodate? If yes, please advise.					

Applicant 3

Name		D.O.B			
Postal Address					
Contact Details	Home				
	Mobile				
	Email				
Background Information: (Previous work in radio/journalism, relevant qualifications or experience in content area, references/referees)					
Are you aware of any disabilities that Heritage FM may have to accommodate? If yes, please advise.					

PROGRAM CONTENT

Proposed Program Title	
Program Genre: Blues, Indies, Ethnic (What Language), Country, Rock, Jazz etc	
Australian Content % Examples of Music	
Length of Proposed show? Mins/Hour/Hours and why	
Outline a standard show	
Who is your perceived target audience? Youth , seniors, sport-minded ...other	
Please elaborate on target audience	

What time slots would you prefer? (not guaranteed, dependant on availability)

Option 1:	Day _____ Time _____	Option 2:	Day _____ Time _____
Option 3:	Day _____ Time _____	Option 4:	Day _____ Time _____

What technical help outside of what is available in the on-air studio (below left) is required?

CD Players	2	Details:
Record Players	2	
Tape Player	1	
Video Player (for audio interviews)	1	
Microphones	4	

AGREEMENT:

I am willing to be trained at the station and provide required undertakings in regard to station policies, if this application is successful, namely:

- If I am underage (18), I am willing to nominate a mentor (a current financial member of 107.3HFM) who will supervise me at the station.
- I accept that the station is under no obligation to broadcast my program and that my program is subject to review at any time.
- I understand that there may be a delay in obtaining a time slot for my program due to availability and that the schedule is reviewed from time to time.
- I accept that I must commit to the station a minimum of THREE months live-to-air programming.
- I will read, accept and sign the Announcers Policy, V4 2022.
- I will provide a reliable email address and read 107.3HFM emails sent to announcers.
- I would be willing to assist 107.3HFM on a voluntary basis in the following areas (at least one selection must be made below):

- | | | |
|--|---|--|
| <input type="checkbox"/> Admin Office Duties | <input type="checkbox"/> Outside Broadcasts | <input type="checkbox"/> Production |
| <input type="checkbox"/> Writing CSA | <input type="checkbox"/> Cleaning | <input type="checkbox"/> Gardens |
| <input type="checkbox"/> General Maintenance | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Other (Please list) |

And finally understand that I must become a financial member of HFM before my training commences.

Signed: _____ Date: __/__/__

Signed: _____ Date: __/__/__

Signed: _____ Date: __/__/__