

Cambridge Community Television APPLICATION New Renewal

NeighborMedia

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE HOME _____ WORK _____ CELL _____

EMAIL _____

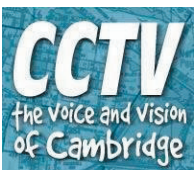
▶ What issues or topics would you plan to cover as a citizen journalist?

▶ Please tell us how you are already involved in your community?

▶ What skills do you hope to gain from the program?

▶ What days and times are you available?

- | | | | |
|-------------------------------|-------------|--------------------------------|-------------|
| <input type="checkbox"/> Mon | time: _____ | <input type="checkbox"/> Thurs | time: _____ |
| <input type="checkbox"/> Tues | time: _____ | <input type="checkbox"/> Fri | time: _____ |
| <input type="checkbox"/> Wed | time: _____ | <input type="checkbox"/> Sun | time: _____ |



675 Massachusetts Ave
Cambridge, MA 02139
ph 617.661.6900
fx 617.661.6927
info@cctvcambridge.org
www.cctvcambridge.org
CHANNELS 9.10.22

OFFICE USE ONLY START DATE: ____/____/____ START DATE: ____/____/____

STAFF: _____ **v 07.24.08**