

**AAPBA NEWS AWARDS -- RADIO**  
**Most Outstanding News Operation Award Questionnaire**

Name and location of station: \_\_\_\_\_

Number of reporters: \_\_\_\_\_ full time, \_\_\_\_\_ part time

Number and length of locally produced newscasts per day:

Monday through Friday: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Weekend: \_\_\_\_\_

\_\_\_\_\_

Why should your entry be considered for this award? Attach additional pages if necessary.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signatures:

STATION MANAGER: \_\_\_\_\_

Print or type name: \_\_\_\_\_

GENERAL MANAGER: \_\_\_\_\_

Print or type name: \_\_\_\_\_