

4 MONTHS

PROGRAMME APPLICATION FORM – 2025

1st Jul – 30th Oct

VALID FOR ONE PROGRAMME APPLICATION

*** All Applicants Must Be Current Financial Members of Tank FM ***

All Applicants ind		iloidi McIII	DCI O OI TAIIK I W
PERSONAL DETAILS (plea	ase print clearly, all detail	s)	
Name:			
Address:			
Phone Numbers: Home	Mc	bile	
Email Address			
I am a current financial member	of Tank FM:		Yes/No
I have completed a Training Cou	urse in Radio Presentat	on	Yes/No
Have you ever been suspended	/expelled from another	Radio Station	ı? Yes/No
PROGRAMME DETAILS			
Name of Programme (keep it brie	ef!)		
Preferred Day	Preferred Time:	Start	Finish
Alternative Day	and/or Alternative Tin	e: Start	Finish
Brief description of programme	(including what new)	egments you	ı intend to introduce)
Programme Priority Rating (for n	nore than one programme)	2 3	4 5 (circle a number
Do you alternate with another p	resenter(s)?		Yes/No
Name(s) of other presenter(s)			
By signing this form, you decle Contractual Agreement, and the times.			
Name (print):	Signatura		Dato
PAE- MAR-2024-MAY-2024 DOC	16-02-2024		Date
EAC- MAR-2014-MAY-2014 IN N.	10-11/- /11/4		