FORM 312–R APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

$APPLICANT\ INFO\overline{RMATION} \textbf{Enter a description of this application to identify it on the main menu:}$

C-Band Renewal

1. Applicant

Oklahoma State University

Phone Number:

405-744-5960

Educational Television Services

Fax Number:

405-744-8563

Street:

DBA Name:

Name:

100 Telecommunications Center

E-Mail:

Zipcode:

sam.welch@okstate.edu

City:

Stillwater

USA

State:

OK 74078

6060

Attention:

Country:

Samuel R Welch

. Contact					
Name:	Samuel R Welch	Phone Number:	405-744-5960		
Company:	Oklahoma State University Educational Television Services	Fax Number:	405–744–8563		
Street:	100 Telecommunications Center	E–Mail:	sam.welch@okstate.edu		
City:	Stillwater	State:	OK		
Country:	USA	Zipcode:	74078 – 6060		
Attention:	Engineering Director	Relationship:	Same		
Rulepart under which	this filing is made Rulepart 25				
. Is a fee submitted wit	th this application?				
		ndicate reason for fee exem	ption (see 47 C.F.R.Section 1.1114).		
Governmental Entit	y Noncommercial education	onal licensee			
Other(please explai	n):				
. Application is for ren xisting license as speci		y with the			
a)File Number	0.454	(b)Date Issued			
SESMOD199508290	0471	1996-02-03	1996-02-03 00:00:00.0		

(d)Location

36 07 20.0 N 97 04 22.0 W

(c)Call Sign

E950244

(e)Nature of Service Domestic/International Fixed Satellite	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)			
(g)Expiration Date 2005–06–02 00:00:00.0	Petition to reinstate:			
6. Note any changes such as discontinuance of use of a frequency, or of application covering this station was filed: N/A	a type of emission or of a transmitter which have been made since the las			
Items 7(a) and (b) apply to Part 21 licenses only. 7(a) Has there been removal of equipment or alteration of facilities as to render the Station not operational?				
If YES when:				
(b) If this is a Multipoint Distribution Service (MDS) station, is there a ownership interest in control by, affiliation with, or leasing arrangement with a cable television company? O N O N				
8. Applicant represents that there has been no change in applicant's orga applicant's relation to the station, or financial responsibility; that applic identified below, is to be considered as a part of this application, and the here any further exceptions, not already covered in question 6 or 7. File Number SESMOD1995082900471 Date 02/23/1996	ants most recent application or report embodying this information, as			

9. Would a Commission grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact? If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311: If NO, Explain briefly why not: This is a renewal for an existing site where no modification or new construction has taken place or is planned.	000	Yes No N/A
10. Certification: The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits pursuant to section 5301 of Anti–Drug Abuse Act of 1988, 21 U.S.C. 853a, or, in the case of a nonindividual applicant (e. g., corporation, partnership or other unincorporated association), no party to the application is subject to denial of federal benefits pusuant to that section. For the definition of a "party" for these purposes, see 47 CFR 1.2002(b). a. Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests a station license in accordance with this application. Applicant acknowledges that all attached exhibits are a material part hereof. b. The undersigned, individually and for the applicant, hereby certifies that the statements made in this application are true, complete and correct to the best of the signer's knowledge and belief, and are made in good faith.	●	Yes No

11. Designate Appropriate Classification:

o Individual								
Unincorporated Association								
Partnership Partnership								
• Corporation								
Governmental Entity								
Other (please specify)								
12. Please supply any need attachments.								
1:	2:		3:					
CERTIFICATION								
13. Typed Name of Person Signing Samuel Richard Welch		14. Title of Person Signing Engineering Director						
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / ORIMPRISONMENT (U.S. Code, Title 18, Section1001), AND/OR REVOCATION OF ANY STATIONAUTHORIZATION (U.S. Code, Title 47, Section312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).								

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 2.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD–PERM, Paperwork Reduction Project (3060–1066), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to jboley@fcc.gov. PLEASE DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060–1066.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104–13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.