

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

STA Shreveport E120201

1. Applicant

Name:	Board of Supervisors of Louisiana State University A & M College	Phone Number:	318-797-5150
DBA Name:		Fax Number:	318-797-5265
Street:	One University Place	E-Mail:	kpoling@lsus.edu
City:	Shreveport	State:	LA
Country:	USA	Zipcode:	71115 -
Attention:	Mr Kermit B Poling		

2. Contact

Name:	Kermit B Poling	Phone Number:	318-797-5150
Company:	Board of Supervisors of Louisiana State University A & M Col	Fax Number:	318-797-5265
Street:	One University Place	E-Mail:	kpoling@lsus.edu
City:	Shreveport	State:	LA
Country:	USA	Zipcode:	71115 -
Attention:	Kermit B Poling	Relationship:	Same

(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)

3. Reference File Number SESLIC2012100300898 or Submission ID

4a. Is a fee submitted with this application?

- If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).
- Governmental Entity Noncommercial educational licensee
- Other (please explain):

4b. Fee Classification CGX - Fixed Satellite Transmit/Receive Earth Station

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date

11/21/2012

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