

Podcasting Across Nebraska

2006-2007 Application

Applicant:

Address:

Contact Name:

Phone Number:

E-mail Address:

1. Is this application from:

_____ A single community

_____ A single community with multiple partners (Please list partners below.)

_____ A regional group of communities (Please list participating communities and organizations below.)

Participating communities and organizations:

Who will act as the lead for this project?

Where will the equipment be housed?

