

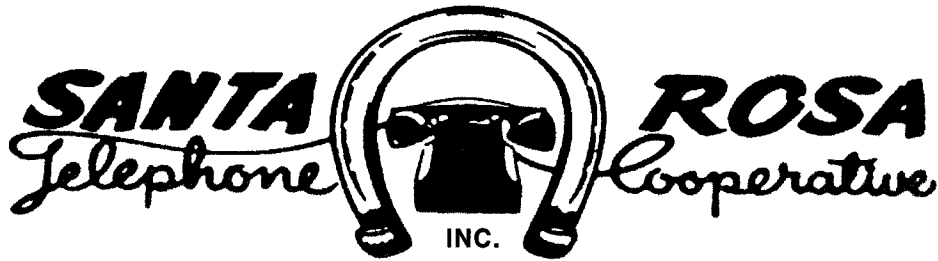


Control Number: 30240



Item Number: 2368

Addendum StartPage: 0



P. O. BOX 2128 • 7110 HWY. 287 EAST
TELEPHONE 940-886-2217
FAX 940-886-2025
VERNON, TEXAS 76385-2128

RECEIVED
2014 DEC 22 PM 1:48
PUBLIC UTILITY COMMISSION
FILING CLERK

December 22, 2014

Central Office Filing Clerk
Public Utility Commission of Texas
P.O. Box 13326
1701 N. Congress Avenue
Austin, TX 78711

Re: Project No. 30240 – Annual Progress Report - Enhance Supplier and
Workforce Diversity for Santa Rosa Communications, Inc.

Dear Filing Clerk:

Santa Rosa Communications, Inc. is a one hundred percent owned subsidiary of Santa Rosa Telephone Cooperative Inc.; therefore, Santa Rosa Communications has no employees. Santa Rosa Telephone Cooperative, Inc. has filed its annual plan to Enhance Workforce Diversity under PURA 52.256(b).

All data provided on both the HUB Report and Workforce Diversity is for both Santa Rosa Telephone Cooperative ILEC/CLEC and Santa Rosa Communications.

Sincerely,

Jason Tole,
Chief Financial Officer

2368

WORKFORCE AND SUPPLIER DIVERSITY FORM
WORKFORCE DIVERSITY
Santa Rosa Communications

Occupational Categories	NUMBER OF TEXAS FULL-TIME EMPLOYEES FOR REPORTING YEAR												
	Combined Total	Company Totals		Caucasian		African American		Hispanic		Asian		American Indian	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Officials and Managers	0	0	0										
Professionals	0	0	0										
Technicians	0	0	0										
Sales Workers	0	0	0										
Office and Clerical	0	0	0										
Craft Workers (Skilled)	0	0	0										
Operatives (Semi-skilled)	0	0	0										
Laborers (Unskilled)	0	0	0										
Service Workers	0	0	0										
Previous Year Totals	0	0	0										
This Year Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

NOTE: Double-click on embedded Excel chart to open. Click on a cell or use arrow keys to select an occupational category and ethnic group to update workforce diversity numbers. Do not enter information in Combined Total and Company Totals columns or the This Year Totals row as these will update automatically. Cells left blank will be counted as zero. Click anywhere outside of chart to exit.

FEDERAL COMMUNICATIONS COMMISSION
Washington, DC 20554

Approved by OMB

3060-0076

Est. time per response:
1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

(Please read instructions before completing and for Notice regarding public burden.)

SECTION I - General Information

1. Name and Mailing Address of Respondent

Santa Rosa Communications
PO Box 2128
Vernon, TX. 76385☐ Check here if this
is a change of
address.

2. Year Report Filed

2014

3. Reporting Period (Ending Date of Pay
Period Covered by Report)

December 2014

4. Number of Full-Time Employees during Selected
Reporting Period (check one):

- a.
- ☒
- Fewer than 16 (complete Sections I, IV, and V only)
-
- b.
- ☐
- 16 or more (complete all sections)

SECTION II - Full-Time Employees.

Job Categories	Number of Employees (Report employees in only one category)														Total Columns A - N
	Race/Ethnicity														
	Hispanic or Latino		Not-Hispanic or Latino												
			Male				Female								
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
Executive/Senior Level Officials and Managers	1 1														0
First/Mid-Level Officials and Managers	1 2														0
Professionals	2														0
Technicians	3														0
Sales Workers	4														0
Administrative Support Workers	5														0
Craft Workers	6														0
Operatives	7														0
Laborers and Helpers	8														0
Service Workers	9														0
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION III - Part-Time Employees.

Job Categories	Number of Employees (Report employees in only one category)																Total Columns A - N
	Race/Ethnicity																
	Hispanic or Latino		Not-Hispanic or Latino														
			Male						Female								
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races			
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O		
Executive/Senior Level Officials and Managers	1.1														0		
First/Mid-Level Officials and Managers	1.2														0		
Professionals	2														0		
Technicians	3														0		
Sales Workers	4														0		
Administrative Support Workers	5														0		
Craft Workers	6														0		
Operatives	7														0		
Laborers and Helpers	8														0		
Service Workers	9														0		
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PREVIOUS YEAR TOTAL	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.



This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.



This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.

SECTION V - Certification

I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.

Date 12/22/2014	Typed or Printed Name of Person Signing Jason Tole	Signature 	Telephone No. (940) 886-2217
Title of Person Signing Asst. Mgr./Chief Financial Officer		WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	