#### Australian Maritime College Locked Bag 1394, Launceston Tas 7250 Phone 1300 852 701

Email amc.ar@utas.edu.au Web www.amc.edu.au/industry/amateur-radio









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form

### Application for Amateur Operator's Certificate of Proficiency (REGULATIONS)

# Delegation/Release of Information to Third Party

The Australian Communications and Media Authority (ACMA) has, under subsection 122A (1) of the Radiocommunications Act 1992 (Act), delegated the power to issue certificates of proficiency to the University of Tasmania (UTAS). The Australia Maritime College (AMC), an institute of UTAS, provides the service for issuing certificates. The Privacy Act 1988 (Cth) (the Privacy Act) imposes obligations on the ACMA in relation to the collection, security, quality, access, use and disclosure of personal information. These obligations are detailed in the Australian Privacy Principles. As the delegate of the ACMA for proficiency, these obligations also apply to AMC.

AMC may collect personal information if it is reasonably necessary for, or directly related to the conduct of ex out under a Deed Agreement between the AMC and the ACMA. The purpose of the collection of the personal an amateur radio certificate of proficiency. With the exception of disclosing personal information collected t proficiency, the AMC will not use the information for any other purpose, nor will we disclose it, unless we hav under the Privacy Act. If you do not provide the information, we will be unable to process your application for for further information regarding incomplete applications). Further information on the Privacy A

www.acma.gov.au/privacypolicy . The UTAS privacy policy is available at http://www.utas.edu.au/privacy . Th

access personal information about you that is held by AMC or seek the correction of such information. AMC contact de explains how you may complain about a breach of the Privacy Act and how we will deal with such a complaint. In acco result of your examination to be released to your assessor and/or training provider you must give permission. Please ind

If it is OK for The AMC to notify your result to your assessor as well circle/tick YES ... Otherwise select NO

NO

ou may cated at the top of this form. It also ith the Privacy Act, if you require the with a mark your response.

I permit the release of my name and results to my assessor and/or training provider.

Applicant Detail	s	
Surname (please	print): FF	ROGGICARIUS
Given Names:	FF	REDERICO McROBERTSON
Mr: X Ms: O	ther:	
Date of Birth:	24	th March 1930
Please supply at	Phone: (09	9) 8765 4321
least one contact	Mobile: 04	112 345 678
detail	Email: fro	eddo@frog.com.au
Residential Add	ress	
323 Canterbury R	oad	
Ringwood		
State: Victoria		Postcode: 3134
Postal Address (	if different	to residential address)
P.O. Box 1673		
Melbourne		
State: Victoria		Postcode: 3001
Declaration		
To the best of my	knowledge, th	ne information given by me
on this application	is true and co	orrect in every detail.
Freddo Fr	- og	11th May 2020
Signature of Appl	icant	Date

Surname (please	print): FROGGICARIUS
Given Names:	FREDERICO McROBERTSON
Mr: X Ms: O	Other:
Date of Birth:	24th March 1930
Please supply at	Phone: (09) 8765 4321
least <u>one</u> contact detail	Mobile: 0412 345 678
oetali	Email: freddo@frog.com.au
Residential Add	ress
323 Canterbury R	oad
Ringwood	
State: Victoria	Postcode: 3134
Postal Address	if different to residential address)
P.O. Box 1673	
Melbourne	
State: Victoria	Postcode: 3001
Declaration	
on this application	knowledge, the information given by me is true and correct in every detail.
Freddo Fr	2020 11th May 2020
Signature of Appl	icant Date

Signature of Applicant Date	
Fees - Payable on Application. Refer	
http://www.amc.edu.au/industry/amateur-radio ft	or current fee schedule.
Regulations Application Fee	\$90
In most cases you are only paying for	icable)
the regulations assessment. Callsign	
application fees should not be listed.	\$90
Please choose one option:	

### Photo - name on back and certified by Assessor

- Please supply one current, colour passport size photograph of yourself (no hats, sunglasses or other obstructions).
- Endorsement: Print your name clearly on the back of the photograph and have it signed by the Examination Assessor

Place photo in plastic bag, do not attach in any form it affects the quality of the photo

Examin <u>ation Details — Assessor to Comp</u> lete	Examination	Details - /	Assessor t	to (	comp	et	e
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Day:

Email a couple of GOOD PASSPORT QUALITY PHOTOGRAPHS to your Assessor. These photographs should be against a PLAIN LIGHT WALL.

ignature of Assessor Da
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## This section AMC Office use only:

As you will be required to email forms to assessors The AMC cannot accept Card Payments. Contact the AMC or use the online payment portal and note the receipt number.

If you have paid for Standard, Regulations and a Callsign just list the receipt number here!

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DOCUMENTS.	יפו זען	MENU	IIV.	CHILL

- aparatus Licence Application Form (ACMA Amateur 1): New Service / Variation
- Callsign Recommendation Form

$\bar{\Box}$	By me – cheque/money order payable to	. X	v me – online pay	ment at www.amc.edu.au/industry/amateur-radio	Receipt Number:
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Fail

Australian Maritime College Locked Bag 1394, Launceston Tas 7250 Phone 1300 852 701 Email amc.an@utas.edu.au Web www.amc.edu.au/industry/amateur-radio

**Applicant Details** Surname (please print):

Given Names:







### Application for Amateur Operator's Certificate of Proficiency (STANDARD)

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### Delegation/Release of Information to Third Party

The Australian Communications and Media Authority (ACMA) has, under subsection 122A (1) of the Radiocommunications Act 1992 (Act), delegated the power to issue certificates of proficiency to the University of Tasmania (UTAS). The Australia Maritime College (AMC), an institute of UTAS, provides the service for issuing certificates. The Privacy Act 1988 (Cth) (the Privacy Act) imposes obligations on the ACMA in relation to the collection, security, quality, access, use and disclosure of personal information. These obligations are detailed in the Australian Privacy Principles. As the delegate of the ACMA for proficiency, these obligations also apply to AMC. If it is OK for The AMC to

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0 50 YES ... Otherwise select NO at

NO

ated at the top of this form. It also th the Privacy Act, if you require the with a mark your response.

I permit the release of my name and results to my assessor and/or training provider.

FREDERICO MCROBERTSON

**FROGGICARIUS** 

Officer (Validae)	THE DETAILS THE THE TENT OF TH
Mr: X Ms: C	Other:
Date of Birth:	24th March 1930
Please supply at	Phone: (09) 8765 4321
least <u>one</u> contact	Mobile: 0412 345 678
detail	Email: freddo@frog.com.au
Residential Add	ress
323 Canterbury R	oad
Ringwood	
State: Victoria	Postcode: 3134
Postal Address	if different to residential address)
P.O. Box 1673	
Melbourne	
State: Victoria	Postcode: 3001
Declaration	
To the best of my	knowledge, the information given by me
on this application	is true and correct in every detail.
Freddo Fr	og 11th May 2020
Signature of Appl	icant Date
Fees - Payable on A	
http://www.amc.edu.	au/industry/amateur-radio for current fee schedule.
Standard Applica	ation Fee \$90
Callsign Recomn	pendation Fee (if applicable)

	manne on back and certifica i	7,
e Endors	ort size photograph of yourself (no unglasses or other obstructions). sement: Print your name clearly e back of the photograph and it signed by the Examination	Place photo in plastic bag, <u>do not</u> attach in any form it affects the quality of the photo
Examir	nation Details – Assessor to Co	omplete
Assess	Email a couple of GOOD PASSP	PORT
Locati	QUALITY PHOTOGRAPHS to yo	
Day:	Assessor. These photographs sh	
Practi	be against a PLAIN LIGHT WA	v Completed
	be against a r LAIN LIGHT WA	
Signatu	re of Assessor Date	

Dhoto - name on back and o

This section Al	MC Office	use only:		
Date Received:		Date Acce	pted:	
Receipt:				
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As you will be re	quired to $\epsilon$	email forms	to asses-	
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Contact the Al	MC or use t	he online p	ayment	
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Documents for war	rded to ACM	u·		
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☐ Callsign Rec	ommendatio	n Form		

TOTAL FEES	BEI	NG	PAID
Please choose	e one	opt	ion:

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Level:

(2☑)3□

■ By me – cheque/money order payable to: University of Tasmania ABN 30 76
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\$35

**\$** 125

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# LEVEL 2 CALLSIGN RECOMMENDATION FORM

(2 Letter Callsigns from States/Territories other than Vic, NSW and Qld)
(3 and 4 Letter Callsigns from any State/Territory)

OFFICE USE ONLY
ALLOCATED

Applicant Details:		
Title: Mr. Given Name: FREDERICO	Middle Name:	McROBERTSON
Surname: FROGGICARIUS	Date of Birth:	24th March 1930
Postal Address: (Provide either a street address or PO Box) P.O. Box 1673		
Suburb: Melbourne	State: Victoria	Postcode: 3001
Contact Details:		
Phone: FREDERICO (Freddo)	Mobile: 0412 345 678	
Email: freddo@frog.com.au		
Type of Licence the Callsign will be used w	vith:	Most applicants will already have a licence so callsign and
Foundation  Standa   Existing ACMA Client Number: 10987654/1	Advanced □	ACMA Client Number (from RADCOM Register — <a href="https://web.acma.gov.au/rrl/">https://web.acma.gov.au/rrl/</a>
Current Callsign (if held): V K 3 F X Y Z		register_search.main_page )
OR Certificate Type and Number:		should be listed.
Date/Place of Examination: Remote—Conducted b	y Steve Ireland VK3VM / VI	C3SIR
1 <sup>st</sup> Callsign Preference: VK 3 N Y X  2 <sup>nd</sup> Callsign Preference: VK 3 N Y Z		ist "remote" and the name and callsign of your assessor
Any other information attached? Yes □	No 🗵	
Signed: Freddo Frog		Date: 11th May 2020
Please see privacy informat Fees – Payable on Application: Refer to current fee schedule advertised on <a form<="" href="http://www.http://ww&lt;/td&gt;&lt;td&gt;Include the Receipt&lt;/td&gt;&lt;td&gt;t Number that is also listed lication for Amateur Radio licency — Standard" td=""></a>		
☐ I have included payment details on my Examina		fice use
OR OR		only:
<ul> <li>□ Cheque/Money Order payable to: University of</li> <li>□ Online payment at <a href="http://www.amo.edu.au/in">http://www.amo.edu.au/in</a></li> </ul>		Date Received:
Receipt Number: R1234	austry/amateur-raulu	Receipt:
☐ I would like to be contacted by the AMC Amate	ur Radio Office for	ACMA Notified:
payment.		

## Application form for amateur nonassigned apparatus licence





### General Instructions

You must be qualified before you apply. The Aus the amateur qualifications and call sign allocation

Applications for apparatus licences are made in a

Before filling out this form, please read these ger please refer to the Guidance Notes attached to the Please print clearly. Illegible, unclear or incomple

This sample only is appropriate for someone that already holds a Foundation Licence.

If you want to retain your F-Call (as many do) check "New Service". Otherwise select "Variation to Existing Service". Varying

a Service lets previous calls go; licence charges can be rebated.

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form,

nanages

Applicant's details: provide the existing or proposed Disclosure of personal details - Information provided by the applicant of authorised representative in a field of this form that is marked with an asterisk (\*) is required by section 147 of the Radiocommunications Act to be disclosed to the public by the ACMA in the Register of Radiocommunications Licences. The ACMA will disclose the contents of the Register by making it available for inspection at any ACMA

( ) Variation to an existing service
( ) Advanced
Entity Type (Description of entity type; e.g. Australian Public
Company, Individual/Sole Trader, Local Government
PERSON
Contact details
DUSINESS ( 09 ) 8765 4321
WORLE 0412 345 678
OTHER PHONE ( 09 ) 8765 4321
FACSIMLE ( )
freddo@frog.com.au
Postal address "
P.O. Box 1673
Melbourne
Victoria POSTCODE 3001
Residential or business address
IF NO POSTAL ADDRESS IS PROVIDED, THE RESIDENTIAL OR BUSINESS ADDRESS WILL BE TAKEN AS THE POSTAL ADDRESS AND THE ABOVE MENTIONED DISCLOSURE PROVISIONS WILL APPLY.
323 Canterbury Road
Ringwood
Victoria POSTCOOCE 3134
If you would like licence(s) to have particular start and expiry dates, please specify them here:

Up to 5 years can be requested.

Explay

1 Year

#### Station details Applicant qualifications 2<sup>nd</sup> Station location details (if required) CERTIFICATE TYPE: LEAVE BLANK CERTIFICATE NUMBER: STREET SUBURB/TOWN POSTCODE 1st Station location details 323 Canterbury Road NUMBER You can List more operational addresses (i.e. STREET Ringwood Holiday Homes, Workplace etc.) вивикалтоми Victoria POSTCODE 3134

#### F Payment of fees

( X ) I

Once processed, an invoice will be issued. The licence will be issued on receipt of payment. Licences can be paid for in full or by annual instalments. Further details about payment options can be found in the ACMA's Apparatus Licence Fee Schedule available on the ACMA website at <a href="mailto:acma.gov.au">acma.gov.au</a>.

on the ACMA website at <u>acma.gov.au</u>.

I wish to pay for the licence in full.

I wish to pay by annual instalments.

Important notes on payment of fees:

- Cheques or money orders should be made payable to the Australian Communications and Media Authority.
- Consideration of an application attracts an administrative
   s to issue the licence.

At \$55/year its crazy to use instalments.

### G Declaration (A LICENCE MUST BE HELD BY EITHER AN INDIMIDUAL OR A BODY CORPORATE)

I declare that the information provided in this application, and in any accompanying documents, by me as the applicant, or as a person authorised "\*by the applicant, is true and correct in every detail and that the equipment to be employed is of a type accepted by the ACMA for licensing purposes.

SIGNATURE	Freddo Frog	
PRINT NAME	FREDERICO FROGGICARIUS	
DATE	11th May 2020	
NAME OF AUTHORISED AGENT'S ORGANISATION (IF A BODY CORPORATE)		

"If you are not registered with the ACMA as an accredited person, attach copy of written agency agreement confirming that you are authorised to act on the applicant's behalf in this particular matter; otherwise, sign the acknowledgment below.

I certify that I am authorised to act as an agent in relation to this application.

SIGNATURE
PRINT NAME
DATE
NAME OF AUTHORISED AGENTS ORGANISATION (IF A BODY CORPORATE)

#### Where to send this form

Please send your completed application form to the ACMA's Customer Service Centre:

Customer Service Centre PO Box 78 Belconnen ACT 2616

Telephone: 1300 850 115 Facsimile: (02) 6219 5347 Email: info@acma.gov.au

Page 3 Not Included as it is only informational