

Republic of the Philippines NATIONAL TELECOMMUNICATIONS COMMISSION BIR Road, East Triangle, Diliman, Quezon City

 Form No.
 NTC 1-01

 Revision No.
 03

 Revision Date
 03/31/2023

APPLICATION FOR RADIO OPERATOR EXAMINATION

INSTRUCTIONS:

- (1) Accomplish this application form properly, in ALL CAPS, handwritten or computer-printed.
- (2) Attach the complete requirements including supporting documents. For the List of requirements, please refer to the *NTC Citizen's Charter* at the NTC website: ntc.gov.ph



(3) Check	. (√) approp	priate box. Indicate "N/A"	for items not app	licable.		. 0.20110	. <u></u>	901.611		Val	
RADIOTELEGRAPHY AM.											
1RTG - Elements 1, 2, 5, 6 & Code (25/20 wpm)					Class A - Elements 8, 9, 10 & Code (5 wpm)						
1RTG - Code (25/20 wpm)					Class A - Code (5 wpm) Only						
2RTG - Elements 1, 2, 5, 6 & Code (16 wpm)					Class B - Elements 5, 6 & 7						
2RTG - Code (16wpm)					Class B - Element 2						
3RTG - Elements 1, 2, 5 & Code (16 wpm) 3RTG - Code (16wpm)					Class C - Elements 2, 3 & 4 Class D - Element 2						
		om)				Class	D - EI	ement 2			
RADIOTELEPHON				RES1	RICT	-	_	ELEPHONE			
1PHN - Elements 1, 2, 3 & 4 2PHN - Elements 1, 2 & 3					RROC - Aircraft - Element 1						
	· Elements 1, · Elements 1			DATE	. OE E	-V A NA	(mm/d	d/sa/			
		α 2		DATE	OF	ZAIVI	(mm/a	ш/уу)			
APPLICANT'S DE Last Name					Dete	of Diet	·b /	/ al al (, m, s)			
F: () !	Lopez				Date of Birth (mm/dd/yy) Sex			/aa/yy) T	Male		IFamal
								FILIPINO	liviale	V	Femal
Unit/Rm/House/Bldg No.		T			Nationality Street		PUROK 5				
Barangay	ag No.	CUBACUB			City/Municipality		Mandaue City				
Province		Cebu			Zip Code		6014				
Contact Number 09912100333					Email Address		ess				
School Attended											
Course Taken					Year	Gradu	ıated				
APPLICANT'S RE	QUEST FO	R ASSISTANCE (for pers	sons with disabilities	s, senior				omen or pers	sons with s	pecial need	s)
Do you have any spe	cial needs a	nd/or requests during the ex	amination?		Yes		No				
If yes, please indicate	e your specif	ic needs and/or request.									
DECLARATION											
		ve entries are true and corr									
		s application form that may am freely giving full consen									
10713, Data Privacy		ann noory giving rain concorn		and proo	ocog	or port	-				1
							1	OP NO).:	1485031	
							1	OIN DA	TE:	3/04 , 20	25
Signature over Printed Name of Applicant							i	AMOUNT:		P50.00	
09/20/2025							ı		D: : A . I . O		ı
Date Accomplished							!	-	Ricci Angela Ca		. !
		THO FORM	IO NOT FOR OAL F.A	NID OAL	LDE DE		<u>.</u> _		ollecting Of	ilcer	!
			IS NOT FOR SALE A								
					ION	SLIP					
		idio O <u>perators Examina</u>	ation Committee						_		
Please admit Mr. / Ms. Fermelita Abapo Lopez											
with mailing	address at									1/5	
in the exami	in the examination for Admission Slip for Radio Operator Examination										
Place of Exam: Regular Radio Operators' Examination (Cebu City)										66A	Many ?
Date of Exar		yy) 09/20/2025								1.64	No. 60 State Committee
Time of Exar	m:	12:00 AM-01:30 AM									
									chel Mari Seno		
I								Author	rized Offic	er	_

INSTRUCTIONS FOR THE EXAMINEE:

- 1. Examinees shall present this Admission Slip and any valid government issued ID with picture or School ID, for students. (No Admission Slip and ID, No Exam.)
- 2. Examinees who are late for more than 30 minutes shall not be allowed to take the examination.
- 3. Request for re-schedule of examination must be filed at least 1 week before the date of examination.
- 4. In case of suspension / cancellation of work in government offices due to force majeure, the scheduled regular examination shall be conducted on the next regular working day.

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED