



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

Form No. **NTC 1-02**  
Revision No. **01**  
Revision Date **03/31/2021**

## APPLICATION FOR RADIO OPERATOR CERTIFICATE

### 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 2021 Second Edition** at NTC website: [www.ntc.gov.ph](http://www.ntc.gov.ph)
- (3) Check (✓) appropriate box. Indicate "N/A" for items not applicable.

### TYPE OF APPLICATION

<input type="checkbox"/>	NEW
<input type="checkbox"/>	RENEWAL
<input type="checkbox"/>	MODIFICATION due to

NO. OF YEARS

### TYPE OF CERTIFICATE

<input type="checkbox"/>	1RTG	<input type="checkbox"/>	SROP
<input type="checkbox"/>	2RTG	<input type="checkbox"/>	RROC-Land Mobile (RLM)
<input type="checkbox"/>	3RTG	<input type="checkbox"/>	RROC-Aircraft
<input type="checkbox"/>	1PHN	<input type="checkbox"/>	GROC (Government)
<input type="checkbox"/>	2PHN	<input type="checkbox"/>	TP RROC-Aircraft (Foreign Pilot)
<input type="checkbox"/>	3PHN	<input type="checkbox"/>	OTHERS, specify

### APPLICANT'S DETAILS

Last Name	De La Salde	Date of Birth (mm/dd/yy)	04/05/1993		
First Name	Saint Anthony	Weight (kg)	82	Height (cm)	72
Middle Name	Gravino	Status of Employment	<input checked="" type="checkbox"/> Employed	<input type="checkbox"/> Unemployed	
Sex	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Local	<input type="checkbox"/> Foreign	
Nationality	FILIPINO				
Unit/Rm/House/Bldg No.		Street	Manuel Quezon street		
Barangay	Ibo	City/Municipality			
Province	Cebu	Zip Code	6015		
Contact Number	09670128126	Email Address			

### EXAM/SEMINAR DETAILS

Place of Exam/Seminar		Date (mm/dd/yy)	2025-07-25	Rating	
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### DECLARATION

I hereby declare that all the above entries are true and correct. Under the Revised Penal Code, I shall be held liable for any willful false statement(s) or misrepresentation(s) made in this application form that may serve as a valid ground for the denial of this application and/or cancellation/revocation of the permit issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Data Privacy Act of 2012.

Signature over Printed Name of Applicant

Date Accomplished

OR	NO.: 1484804
	DATE: 07/25, 2025
	AMOUNT: P210.00
	Ricci Angela Cantos Collecting Officer