

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

Form No. Revision No. Revision Date <u>03/31/2023</u>

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



NTC 1-01

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	•	please refer to the NTC Ci priate box. Indicate "N/A" fo			gov.ph		*	SHS	
1RTG 2RTG 2RTG 3RTG 3RTG 1PHN 2PHN	G - Elements 1 G - Code (25/2) G - Elements 1 G - Code (16w) G - Elements 1 G - Code (16w) DNY J - Elements 1 J - Elements 1	, 2, 5, 6 & Code (16 wpm) pm) , 2, 5 & Code (16 wpm) pm) , 2, 3 & 4 , 2 & 3	RES ⁻	AMATEUR Class A - Elements 8, 9, 10 & Code (5 wpm) Class A - Code (5 wpm) Only Class B - Elements 5, 6 & 7 Class B - Element 2 Class C - Elements 2, 3 & 4 Class D - Element 2 RESTRICTED RADIOTELEPHONE RROC - Aircraft - Element 1					
	I - Elements 1	& 2	DATI	E OF EXAM (mm/d	d/yy)				
APPLICANT'S D Last Name	ETAILS Medelo			Date of Right /	/dd/\ray				
First Name Edwin				Date of Birth (mm/	L /	Male		Female	
Middle Name Almazan				Nationality	Filipino	Iviale		Tremate	
Unit/Rm/House/Bldg No.				Street	. шршо				
5		Umapad	ad		Mandaue City				
Province Cebu					6014				
Contact Number		n/a				0017			
School Attended				Email Address					
Course Taken				Year Graduated					
	EQUEST FO	OR ASSISTANCE (for perso	ons with disabilities, senior		omen or pers	sons with spe	ecial needs)		
		nd/or requests during the exar		Yes No	1				
		ic needs and/or request.							
DECLARATION									
misrepresentation(s	s) made in this ed. Further, I y Act of 2012.	ve entries are true and corrects application form that may so am freely giving full consent for the printed Name of Appli 09/20/2025	erve as a valid ground fo for the collection and proc	r the denial of this a ressing of personal in F - I I	pplication and formation in	nd/or cancella accordance D.:	ation/revocat with Republication 1485985	tion of the	
		Date Accomplished		!	С	Ricci Angela Canto			
		THIS FORM IS	NOT FOR SALE AND CAN	N BE REPRODUCED					
		EXAM	INATION ADMISS	SION SLIP					
TO: THE CHAIRPERSON, Radio Please admit Mr. / Ms. with mailing address at		Edwin Almazan Medelo	ion Committee						
in the examination for		Admission Slip for Radio Operator F	Admission Slip for Radio Operator Examination						
Place of Exam: Date of Exam: (mm/dd/yy) Time of Exam:		Regular Radio Operators' Examination				_	A	SHS	
INSTRUCTIONS	_		ad any valid governmen	nt issued ID with si	Autho	arl Louis Intino rized Office	r		
1. Examine	es snall pres	sent this Admission Slip an	ia any valla governmen	ıt ıssuea ID with pi	cture 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.

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