

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 (**√**) appropriate box. Indicate "N/A" for items not applicable.



(, , , , , , , , , , , , , , , , , , ,	•								
RADIOTELEGRAPHY			EUR						
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)			Class C - Elements 2, 3 & 4						
3RTG - Code (16	wpm)			Class D - El	ement 2				
RADIOTELEPHONY		REST	RICTE	D RADIO	TELEPHON	ΙE			
1PHN - Elements			RROC - Air	craft - Elemer	nt 1				
2PHN - Elements	,				💳			_	
3PHN - Elements	1 & 2	DATE	OF E	KAM (mm/	dd/yy)				
APPLICANT'S DETAILS						_			
Last Name Encabo				f Birth (mn	n/dd/yy)		_		
First Name Jerry			Sex		√	Male		Female	
Middle Name Dela Vectoria			Nation	ality	Filipino				
Unit/Rm/House/Bldg No.			Street						
Barangay	Poblacion Pardo		City/Municipality Cebu City (Capital) Zip Code 6000						
Province	Cebu	Pebu 9954420292			6000				
Contact Number		Email	Address						
School Attended			\/C	Nl 4l	1				
Course Taken APPLICANT'S REQUEST FOR ASSISTANCE (for persons with disability)				Graduated			:-!	1	
	and/or requests during the examinati				vomen or per	sons with spe	eciai needs	,	
If yes, please indicate your spe	· · · · · · · · · · · · · · · · · · ·	ion?	Yes	No					
DECLARATION	cine needs and/or request.								
	pove entries are true and correct. Un	nder the Revised Per	nal Cod	e. I shall be	held liable	for anv willfui	false state	ement(s) o	
•	his application form that may serve a					-		. ,	
	I am freely giving full consent for the	collection and proce	essing c	of personal i	nformation in	accordance	with Repul	olic Act No	
10713, Data Privacy Act of 201	2.						1485892	. – –!	
			: ()R "						
			DATE:, 20						
Signature over Printed Name of Applicant 09/20/2025				!	AMOUNT:	Pt	50.00	!	
			!		Ricci Angela Canto	os	!		
			i	-	Collecting Off		i		
	THIS FORM IS NOT	FOR SALE AND CAN	BF RF	PRODUCED					
	FXAMINA	TION ADMISS	ON S	I IP					
TO THE OHAIRREDOON I				/_					
Please admit Mr. / Ms	Radio Operators Examination C	ommittee				— •			
		Jerry Dela Vectoria Encabo							
with mailing address a									
in the examination for	Admission Slip for Padio Operator Evamination	on					3		
Place of Exam:	Regular Radio Operators' Examination (Cebu 0	City)							
Date of Exam: (mm/de									
Time of Exam:	12:00 AM-01:30 AM							_	
						Carl Louis Intino			
INCTRUCTIONS FOR THE	EVARAINEE.				Autho	orized Office	r		
INSTRUCTIONS FOR THE	EAAWINEE:	alial ara	. :	d IDitl- :-	:-4				

- 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