

Republic of the Philippines

NATIONAL TELECOMMUNICATIONS COMMISSION

BIR Road, East Triangle, Diliman, Quezon City

Form No. Revision No. 01
Revision Date 03/31/2021

APPLICATION FOR RADIO OPERATOR CERTIFICATE

TYPE OF CERTIFICATE

INSTRUCTIONS:

TYPE OF APPLICATION

- (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
- (3) Check (✔) appropriate box. Indicate "N/A" for items not applicable.

RENEWAL MODIFICATION due to PINN NO. OF YEARS APPLICANT'S DETAILS Last Name Arnel Model Name Reposar Sex Male Reposar Sex Male Reposar Sex Male Reposar Sex Mationality Fillipino Street Purpower Misamis Occidental Zip Code Contact Number O9120644158 Email Address Prace of Exam/Seminar DeclaraRTION I Precly 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 making pracessing of personal information in accordance with Republic Act No. 10713, Dat Privacy Act of 2012. Bara Collecting Officer Date Accomplished THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED		NEW				1RTG	;		SROP					
NO. OF YEARS 3 APPLICANT'S DETAILS Last Name Candano Date of Birth (mm/dd/yy) Height (cm) Sex Male Female Employment Local Foreign Nationality Filipino Street PUROK 3 Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Decentary declare that all the above entries are true and correct. Under the Revised Penal Code, I shall be held liable for any wilfful false statement(s) of misrepresentation(s) made in this application from that may serve as a valid ground for the denial of this application and/or cancellation/veraction of the pair subject of the Act No. 10713, Date Privacy Act of 2012. Date Accomplished		RENEWAL					2RTG		RROC-Land Mobile (RLM)					
APPLICANT'S DETAILS Last Name Candano Date of Birth (mm/dd/yy) Height (cm) Middle Name Reposar Status of Employment Employed Local Nationality Filipino Street PUROK 3 Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating DECLARATION The Reposar The Reposar The Republic Act No. 10713, Date Province The Republic Act No. 10713, Date Province		MODIFICATION due to					}		RROC-Aircraft					
APPLICANT'S DETAILS Last Name Candano Date of Birth (mm/dd/yy) First Name Arnel Weight (kg) Height (cm) Middle Name Reposar Sex Male Female Employment Enough Duting Foreign Unit/Rm/House/Bidg No. Street PUROK 3 Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXXMMSEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 misspressentation(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 permissued/granted. Further, I am freely griving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished						1PHN	l		GROC (Gove	rnment)				
APPLICANT'S DETAILS Last Name Candano Weight (kg) Height (cm) Middle Name Reposar Status of Employed Local Foreign Male Female Female Female Foreign Mathyllouse/Bldg No. Street PUROK 3 Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAMSEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating Place of Exam/Seminar Date (mm/dd/yy) Rating Misamis of Employed Unemployed DetCLARATION I hereby declare that all the above entries are true and correct. Under the Revised Penal Code, I shall be held liable for any wilful 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 permissued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished						2PHN	2PHN TP RROC-Aircraft (Foreign Pilot)							
Last Name Candano Date of Birth (mm/dd/yy) Height (cm)	NO. OF YEARS 3					3PHN	I	OTHERS, specify						
Last Name Candano Date of Birth (mm/dd/yy) Height (cm)			=			·								
Last Name Candano Date of Birth (mm/dd/yy) Height (cm)														
First Name Arnel Weight (kg) Height (cm) Middle Name Reposar Sex Male Female Nationality Filipino Unit/Rm/House/Bldg No. Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating DECLARATION I hereby decirate 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 made in this application form that may serve as a valid ground for the denial of this application and/or cancellation/revocation of the perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished	APPLICAN	T'S DETAILS												
Middle Name Reposar Status of Employed Unemployed Sex Male Female Employment Local Foreign Nationality Filipino Street PUROK 3 Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating Details defined in this application form that may serve as a valid ground for the denial of this application and/or cancellation/revocation of the permissued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished	Last Name	Candano	Candano					Date of Birth (mm/			dd/yy)			
Sex Male Female Nationality Filipino Unit/Rm/House/Bldg No. Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished	First Name	Arnel					Weight (kg)			Height	(cm)			
Nationality Filipino Street PUROK 3 Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished	Middle Nam	ne Reposar	Reposar						Employed		Unem	ployed		
Unit/Rm/House/Bidg No. Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 missepresentation(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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished	Sex						Employment		Local					
Barangay SAN APOLINARIO City/Municipality Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished City/Municipality Privacy Code 7214 Brail Address Rating Rating Privacy Action (1) 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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. OR No.: AMOUNT: Date Accomplished	Nationality Filipino								Foreign					
Province Misamis Occidental Zip Code 7214 Contact Number 09120644158 Email Address EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished	Unit/Rm/Ho	use/Bldg No.				Stree	Street PUF		ROK 3					
Contact Number O9120644158 Email Address	Barangay		SAN APOLINARIO			City/l	City/Municipality							
EXAM/SEMINAR DETAILS Place of Exam/Seminar Date (mm/dd/yy) Rating 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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished Collecting Officer	Province		Misamis Occidental			Zip C	Zip Code 72		214					
Place of Exam/Seminar Date (mm/dd/yy) Rating 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 insrepresentation(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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished Date Accomplished	Contact Nur	mber	09120644158			Ema	il Address							
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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. Signature over Printed Name of Applicant Date Accomplished Date Accomplished	EXAM/SEM	IINAR DETAILS						•						
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 perm issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. OR NO.: DATE: NO.: DATE: NO.: DATE: NO.: DATE: NO. NO.: DATE: NO. NO.: DATE: NO. NO.: DATE: NO. NO.: NO.:	Place of Exa	am/Seminar				Date	Date (mm/dd/yy)			F	Rating			
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 permissued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Date Privacy Act of 2012. OR NO.: DATE:	DECLARAT	ΓΙΟΝ												
Signature over Printed Name of Applicant Date Accomplished Date Accomplished	misrepresent issued/grante	tation(s) made in this ed. Further, I am free	application for	rm that may se	erve as a valid	d ground for th	e denial of this	s applic	ation and/or ca	ancellatio	on/revocation	of the permi		
Signature over Printed Name of Applicant Collecting Officer Date Accomplished									OR NO.: DATE	i:	, 20	- ¦		
Date Accomplished		Sigr	ature over P	rinted Name	of Applicant			!				!		
								<u> </u>	Colle	cting Off	icer	_ ;		
THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED			Date /	Accomplished	t									
THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED				·										
THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED														
				THIS FORM I	S NOT FOR	SALE AND CA	N BE REPRO	DUCED)					