

Republic of the Philippines

NATIONAL TELECOMMUNICATIONS COMMISSION

BIR Road, East Triangle, Diliman, Quezon City

Form No. <u>NTC 1-02</u> Revision No. <u>01</u> Revision Date <u>03/31/2021</u>

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.

| | NEW | | | | | | 1RTG | | | SROP | | | | |
|------------------------|---|-----------|--------------------------|-------------------------------|----------------|---------|---------------------|------------------|-----------------|----------------------------------|-------------------|-------------------|-----------------|--|
| | RENEWAL | | | | | | 2RTG | | | RROC-Land Mobile (RLM) | | | | |
| | MODIFICATION due to | | | | | | 3RTG | | | RROC-Aircraft | | | | |
| | | | | | | | 1PHN | | | GROC (Government) | | | | |
| | | | | | | | 2PHN | | | TP RROC-Aircraft (Foreign Pilot) | | | | |
| NO. OF YEARS 3 | | | | | | | 3PHN | | OTHERS, specify | | | | | |
| <u> </u> | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| APPLICAN | T'S DETAILS | 3 | | | | | | | | | | | | |
| Last Name | Donaire | | | | | | Date of Birth (mm/ | | | dd/yy) 06/0 | | /05/2001 | | |
| First Name | Name Calvin | | | | | | | Weight (kg) | | 80 | Heigh | nt (cm) | 165 | |
| Middle Nam | ne Delf i | Delfin | | | | | Status | | | Employed | | ✓ Une | mployed | |
| Sex | ٧ | / | Male | | Female | | Employment | | | ✓ Local | | | | |
| Nationality | FILI | PINO | · · | | | | 1 | | | Foreign | | | | |
| Unit/Rm/House/Bldg No. | | | | | | | Street Ya | | Yan | ngyang Street, Purok Tikling | | | | |
| Barangay | | | South Poblacion | | | | City/Municipality | | | | | | | |
| Province | | | Cebu | | | | Zip Code 6 | | 6018 | 6018 | | | | |
| Contact Number | | | 09618439189 | | | | Email Address | | | | | | | |
| EXAM/SEM | IINAR DETA | ILS | | | | | | | | | | | | |
| Place of Exam/Seminar | | | Airworks, Lapu-lapu City | | | | Date (mm/dd/yy) 202 | | 5-05-24 | | Rating | 92 | | |
| DECLARAT | ΓΙΟΝ | | | | | | | | | | | | | |
| misrepresent | clare that all the lation(s) made lad. Further, I al laf 2012. | in this a | application for | m that may se | rve as a valid | ground | for the | e denial of this | applic | ation and/or ca | ancella | tion/revocatio | on of the permi | |
| | | | | | | | | | (| OR NO.: DATE | : 07/2 | 34721 23, 20_2 | | |
| | | Signa | 07/23/202 | inted Name of 25 Accomplished | | | | | <u>.</u> - | Ricci Ar Colle | ngela ecting C | | ! | |
| | | | | THIS FORM I | S NOT FOR S | SALE AN | ND CAI | N BE REPROI | DUCEE |) | | | | |
| | | | | | | | | | | | | | | |