

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

Form No. NTC 1-01 Revision No. 03 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 of requirements, please refer to the NTC Citizen's Charter at the NTC website: ntc.gov.ph



| (3) Check (✔   | <b>/</b> ) appropria   | te box. Indicate "N/A" for items  | not applicable                      | ).                     |   |  |                                      |  | an_           |
|--|--|---|-------------------------------------|------------------------|---|--|--------------------------------------|--|---------------|
| RADIOTELEGRAPH  1RTG - EI  1RTG - CI  2RTG - EI  2RTG - CI  3RTG - EI  3RTG - CI   | Class A - Elements 8, 9, 10 & Code (5 w<br>Class A - Code (5 wpm) Only<br>Class B - Elements 5, 6 & 7<br>Class B - Element 2<br>Class C - Element 2<br>Class D - Element 2 |   |                                     |                        |   | (5 wpm)  | /pm)                                 |  |               |
| 2PHN - EI<br>3PHN - EI   | ements 1, 2,<br>ements 1, 2 d<br>ements 1 & 2  | & 3   |                                     |                        |   | raft - Elemer  | _                                    |  |               |
| APPLICANT'S DETA   |  |   |                                     | ID-4-                  | f D:-41- /                                    | (111/ )  |                                      |  |               |
| Last Name Arang  |  |   |                                     |                        | of Birth (mm                                  | /dd/yy)  | Mala                                 |  | I =           |
| First Name Renz Middle Name Nere   |  |   |                                     | Sex                    | ality.  | <b>~</b>   | Male                                 |  | Female        |
| Middle Name Nere Unit/Rm/House/Bldg No.  |  |   |                                     | Nation<br>Street       |   | Filipino   |                                      |  |               |
|  |  |   |                                     |                        | lunicipality                                  | Mandaus Oltu   |                                      |  |               |
| Barangay Lab<br>Province Cel   |  | ogon  |                                     | Zip Co                 |   | Mandaue City<br>6014   |                                      |  |               |
| 0 1 111 1  |  | ou .  |                                     |                        | Address                                       | 0014   |                                      |  |               |
| School Attended  | n\a  |   |                                     | Lillali                | Audiess                                       |  |                                      |  |               |
| Course Taken   |  |   |                                     | Vear (                 | Graduated                                     |  |                                      |  |               |
| APPLICANT'S REQU   | inabilities conic  |   |                                     | oman ar nar            | oono with o                                   | nacial naca  | (0)                                  |  |               |
| DECLARATION  I hereby declare that all the above entries are true and correct. Under misrepresentation(s) made in this application form that may serve as a permit issued/granted. Further, I am freely giving full consent for the consent fo |  |   | valid ground fo<br>llection and pro | or the de<br>cessing d | nial of this a of personal ii  I I I PRODUCED | opplication are information in infor | nd/or cance<br>accordance<br><br>D.: | ### ################################## | cation of the |
|  |  | EXAMINATION   | ON ADMIS                            | SION                   | SLIP  |  |                                      |  |               |
| Please admit M<br>with mailing ad  | lr. / Ms.<br>dress at  | O Operators Examination Com   | P Arangga                           |                        |   |  |                                      |  | •             |
| in the examination for<br>Place of Exam:   |  | Admission Slip for Radio Operator Examination  Regular Radio Operators' Examination (Cebu City) |                                     |                        |   |  |                                      |  |               |
| Date of Exam:  |  | 09/20/2025  |                                     |                        |   |  |                                      |  |               |
| Time of Exam:  | R THE EYA  | 12:00 AM-01:30 AM   |                                     |                        |   |  | arl Louis Intino                     | er                                     |               |
|  |  | t this Admission Slip and any va  | alid governme                       | nt issue               | d ID with p                                   | 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.

THIS FORM IS NOT FOR SALE AND CAN BE REPRODUCED