

## 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: <a href="https://ntc.gov.ph">ntc.gov.ph</a>
- (3) Check (✓) appropriate box. Indicate "N/A" for items not applicable.



(3) Check (	<b>7</b> ) appropr	nate box.	muicate N/F	a for items no	ы арриса.	ле.							
RADIOTELEGRAPHY  1RTG - Elements 1, 2, 5, 6 & Code (25/20 wpm) 1RTG - Code (25/20 wpm) 2RTG - Elements 1, 2, 5, 6 & Code (16 wpm) 2RTG - Code (16wpm) 3RTG - Elements 1, 2, 5 & Code (16 wpm) 3RTG - Code (16wpm)					AM	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							
RADIOTELEPHONY  1PHN - Elements 1, 2, 3 & 4  2PHN - Elements 1, 2 & 3  3PHN - Elements 1 & 2						STRICT	RR	OC - Airo	relephon craft - Eleme				
APPLICANT'S DETA	AILS												
	ast Name Encabo					Date of Birth (mm/dd/yy)							
	st Name Jerry					Sex			<b>√</b>	Male		Female	
Middle Name Villarmia							Nationality						
Unit/Rm/House/Bldg No.							Street						
Barangay		Poblacion Pardo						cipality	Cebu City (Capita	1)			
		Cebu				Zip C			6000				
•		09326375796				Ema	il Ad	dress					
School Attended													
Course Taken						Year Graduated							
APPLICANT'S REQ					abilities, ser		ns, pr	egnant v	vomen or pe	rsons with s	pecial nee	eds)	
Do you have any special needs and/or requests during the examination?						Yes	Yes No						
If yes, please indicate y	our specific	needs and	d/or request.										
DECLARATION I hereby declare that a	II 4la a a la ave			anna at I lia alau tia	- Davis ad	Danal Ca			bald liable	f	Ful folos a	4-4	
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Signature over Printed Name of A  09/20/2025  Date Accomplished				pplicant				!	AMOUNT:_	Ricci Angela C		! !	
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with mailing address at													
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iiiie oi Exam:		12:00	AM-01:30 AM										
										Karl Louis Intino			
INSTRUCTIONS FO	R THE FX	AMINEF:							Autn	orized Offic	Jei		
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- 1. 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