



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

Form No. **NTC 1-02**
Revision No. **01**
Revision Date **03/31/2021**

APPLICATION FOR RADIO OPERATOR CERTIFICATE

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 2021 Second Edition** at NTC website: www.ntc.gov.ph
- (3) Check (✓) appropriate box. Indicate "N/A" for items not applicable.

TYPE OF APPLICATION

<input type="checkbox"/>	NEW
<input type="checkbox"/>	RENEWAL
<input type="checkbox"/>	MODIFICATION due to <input type="text"/>

NO. OF YEARS

3

TYPE OF CERTIFICATE

<input type="checkbox"/>	1RTG	<input type="checkbox"/>	SROP
<input type="checkbox"/>	2RTG	<input type="checkbox"/>	RROC-Land Mobile (RLM)
<input type="checkbox"/>	3RTG	<input type="checkbox"/>	RROC-Aircraft
<input type="checkbox"/>	1PHN	<input type="checkbox"/>	GROC (Government)
<input type="checkbox"/>	2PHN	<input type="checkbox"/>	TP RROC-Aircraft (Foreign Pilot)
<input type="checkbox"/>	3PHN	<input type="checkbox"/>	OTHERS, specify <input type="text"/>

APPLICANT'S DETAILS

Last Name	Nuñez			Date of Birth (mm/dd/yy)	07/19/2002			
First Name	Jane			Weight (kg)	48	Height (cm)	151	
Middle Name	Amparo			Status of Employment	<input checked="" type="checkbox"/>	Employed	<input type="checkbox"/>	Unemployed
Sex	<input type="checkbox"/>	Male	<input checked="" type="checkbox"/>		Female	<input checked="" type="checkbox"/>	Local	<input type="checkbox"/>
Nationality	Filipino			Street	ZONE 6			
Unit/Rm/House/Bldg No.				City/Municipality				
Barangay	BUAYA			Zip Code	6015			
Province	Cebu			Email Address				
Contact Number	09105015339							

EXAM/SEMINAR DETAILS

Place of Exam/Seminar	BLUEWATER LLC	Date (mm/dd/yy)	2025-11-08	Rating
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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 permit issued/granted. Further, I am freely giving full consent for the collection and processing of personal information in accordance with Republic Act No. 10713, Data Privacy Act of 2012.

Signature over Printed Name of Applicant

11/18/2025

Date Accomplished

OR NO.: **1487878**
DATE: **11/18 , 2025**
AMOUNT: **P240.00**
Ricci Angela Cantos
Collecting Officer