

RADIOTELEPHONE OPERATOR CERTIFICATE APPLICATION FORM

AERONAUTICAL

(Attach certified proof of aeronautical radio telephony license, or course completed, issued by authentic examining institution. For renewals attach copy of previous ROC issued. Attach original letter from the directorate of civil aviation (NCAA) confirming that the DCA has no objection to the issue of the ROC. Attach certified copy of pilot license.)

PLEASE FILL IN BLOCK LETTERS

	e and names) of ID/Passport: Attach 2x passport photos)	
2. LICENSECATEGORY		
(Indicate if restricted of the control of the contr		
5. COUNTRY OF BIRTH:		
6. DATE OF BIRTH:		
7. GENDER:		
8. ID/PASSPORT NO:		
9. POSTAL ADRESS:		
	0:	
12. FAX NO:		
APPLICANTS SIGNATURE	 DATE	
Warranting that the information provid of the certificate in terms of the relevan	ed herein is true and correct. Undertaking to abide by th nt legislation.	e conditions of issue
ACKNOWLEGEMENT OF RECEIP		FICIAL USE
Name:	Processed By:	
Date:	ROC Number:	
Signature:	Date:	
FEE PAYMENT N\$ 112-00 Receipt no	Signature:	_