

RADIOTELEPHONE OPERATOR CERTIFICATE APPLICATION FORM

AERONAUTICAL

(Attach certified proof of aeronautical radio telephony licence, 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 licence.)

PLEASE FILL IN BLOCK LETTERS

1. **FULL NAMES** (Surname and names): _____
(Attach certified copy of ID/Passport. Attach 2x passport photos)
2. **LICENCE CATERGORY:** _____
(Indicate if restricted or general)
3. **HEIGHT:** _____
4. **COLOUR OF EYES:** _____
5. **COUNTRY OF BIRTH:** _____
6. **DATE OF BIRTH:** _____
7. **GENDER:** _____
8. **ID/PASSPORT NO.:** _____
9. **POSTAL ADDRESS:** _____
10. **CONTACT TEL./CELL NO.:** _____
11. **E-MAIL ADDRESS:** _____
12. **FAX NO.:** _____

APPLICANTS SIGNATURE

DATE

Warranting that the information provided herein is true and correct. Undertaking to abide by the conditions of issue of the certificate in terms of the relevant legislation.

ACKNOWLEDGEMENT OF RECEIPT BY CRAN

FOR OFFICIAL USE

Name:	
Date:	
Signature:	
FEE PAYMENT (N\$109.00)	Receipt no.:

Processed by:	
ROC number:	
Date:	
Signature:	