

Fill out this form and save the completed file!
Email the completed form to: Exams@W6SG.net

MARIN AMATEUR RADIO SOCIETY

APPLICATION FOR AMATEUR RADIO LICENSE OR UP-GRADE

Your NAME:

Your FRN #

We no longer take Social Security numbers, so get your FRN by registering here:

<https://www.fcc.gov/wireless/support/knowledge-base/universal-licensing-system-uls-resources/getting-fcc-registration>

ENTER THE DATE YOU WISH TO ATTEND:

mm dd yy

IF ALREADY LICENSED, YOUR CALL IS:

CLASS:

IS THE ADDRESS ON YOUR CURRENT LICENSE CORRECT? YES

NO

CHECK THE LICENSE CLASS YOU WILL BE A CANDIDATE FOR:

TECHNICIAN:

GENERAL:

AMATEUR EXTRA:

Please fill out the blue fields on the next page, save and email the completed PDF to us.

DO NOT SIGN OR DATE IT! We will have you do that in person.

You can ignore the last 2 pages in this PDF

**NCVEC QUICK-FORM 605 APPLICATION
AMATEUR OPERATOR/PRIMARY STATION LICENSE**

SECTION 1 - TO BE COMPLETED BY APPLICANT				PLEASE PRINT LEGIBLY!
PRINT LAST NAME	SUFFIX (Jr., Sr.)	FIRST NAME	M.I.	AMATEUR RADIO CALL SIGN (IF LICENSED)
MAILING ADDRESS (Number and Street or P.O. Box)			FCC REGISTRATION NUMBER (FRN) (MANDATORY)	
CITY	STATE CODE	ZIP CODE	DAYTIME TELEPHONE NUMBER (Including Area Code)	
EMAIL ADDRESS (MANDATORY)				
<p>Basic Qualification Question -- <i>*Answer Required in Order to Process Your Application*</i></p> <p>Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a felony by any state or federal court? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If "YES", see "FCC BASIC QUALIFICATION QUESTION INSTRUCTIONS AND PROCEDURES" on the back of this form.</p>				

I HEREBY APPLY FOR [Make an X in the appropriate box(es)]:

- | | |
|--|--|
| <input type="checkbox"/> EXAMINATION for a new license grant
<input type="checkbox"/> EXAMINATION for upgrade of my license class
<input type="checkbox"/> CHANGE my name on my license to my new name
Former Name: _____
<small>(Last name) (Suffix) (First name) (MI)</small> | <input type="checkbox"/> CHANGE my mailing address to above address
<input type="checkbox"/> CHANGE my station call sign systematically
Applicant's Initials To Confirm _____
<input type="checkbox"/> RENEWAL of my license grant
Exp. Date: _____ |
|--|--|

I certify that:

- I waive any claim to the use of any particular frequency regardless of prior use by license or otherwise;
- All statements and attachments are true, complete, and correct to the best of my knowledge and belief and are made in good faith;
- I am not a representative of a foreign government;
- I am not subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862;
- The construction of my station will NOT be an action which is likely to have a significant environmental effect [See 47 CFR Sections 1.1301-1.1319 and Section 97.13(a)];
- I have read and WILL COMPLY with Section 97.13(c) of the Commission's Rules regarding RADIO FREQUENCY (RF) RADIATION SAFETY and the amateur service section of OST/OET Bulletin Number 65.

Signature of Applicant:

X _____ Date Signed: _____

SECTION 2 - TO BE COMPLETED BY ALL ADMINISTERING VEs

- Applicant is qualified for operator license class:**
- NO NEW LICENSE OR UPGRADE WAS EARNED**
- TECHNICIAN** Element 2
- GENERAL** Elements 2 and 3
- AMATEUR EXTRA** Elements 2, 3, and 4

DATE OF EXAMINATION SESSION
EXAMINATION SESSION LOCATION
VEC ORGANIZATION
VEC RECEIPT DATE

I CERTIFY THAT I HAVE COMPLIED WITH THE ADMINISTERING VE REQUIREMENTS IN PART 97 OF THE COMMISSION'S RULES AND WITH THE INSTRUCTIONS PROVIDED BY THE COORDINATING VEC AND THE FCC.

1st VE's NAME (Print First, MI, Last, Suffix)	VE's STATION CALL SIGN	VE's SIGNATURE (Must match name)	DATE SIGNED

INSTRUCTIONS FOR COMPLETING NCVEC FORM 605 APPLICATION

AMATEUR RADIO LICENSES AND REQUIREMENTS

In the US, there are three Amateur Radio license levels, or license classes which are Technician, General and Amateur Extra. The Federal Communications Commission (FCC) grants these licenses. The exams cover regulations, operating practices, and electronics theory. They are based on cumulative knowledge and build off one another. FCC requires the lower level exams to be passed for the higher level licenses to be issued.

LEVEL 1: **Technician Class**

EXAM: 35 question Technician Written Exam (Element 2)

LEVEL 2: **General Class** (upgrade from Technician)

EXAM: 35 question General Written Exam (Element 3)

LEVEL 3: **Amateur Extra Class** (upgrade from General)

EXAM: 50 question Extra Written Exam (Element 4)

The written examinations are constructed from question pools that have been made public. There is no exemption from the written exam requirements for persons with difficulty in reading, writing, or because of a handicap or disability. There are exam accommodations that can be afforded examinees. To view the question pools and other useful information or to contact an FCC appointed VEC organization, visit www.ncvec.org.

FCC CONTACT INFORMATION

Should you have any questions, please contact the FCC at 877-480-3201 (weekdays), or visit the FCC website at <https://www.fcc.gov/available-support-services>.

FCC REGISTRATION NUMBER (FRN)

Visit FCC CORES FRN registration at <https://apps.fcc.gov/cores/userLogin.do>.

NCVEC FORM 605

The NCVEC Form 605 is for VE / VEC use only. Do not send or provide this form to the FCC. This form is used at a VE exam session to apply for a new or upgrade Amateur Radio Operator/Primary Station license. It may also be used to renew or update your license (change your mailing address, email address, name, etc.). This form may not be used to apply for a new specific "Vanity" station call sign.

FCC APPLICATION FEE

The FCC implemented application Fees for New, Renew, and Vanity Amateur Radio Applications. These fees must be paid **within 10 days of the application submission**.

The URL to pay FCC fees is:

<https://apps.fcc.gov/cores/paymentFrnLogin.do>

FCC CORES Registration help:

<https://apps.fcc.gov/cores/publicHome.do?help=true&csfrToken>

CORES Payment Instructions:

<https://www.fcc.gov/wireless/support/knowledge-base/universal-licensing-system-uls-resources/payment-process-uls>

FCC BASIC QUALIFICATION QUESTION

This item enables the FCC to determine whether an Applicant is eligible under §§ 310(d) and 308(b) of the Telecommunications Act of 1996, to hold or have ownership interest in a station license. Applicants are required to answer this question only if 1) they are filing NCVEC or FCC Form 605 for one of the following purposes indicated: **New, Amendment, Modification (Upgrade or Call sign change), Renewal Only, or Renewal/Modification**; and 2) the answers have changed from those previously provided. Applicants using Form 605 for any other purpose (e.g.: address or email change) are not required to answer this question.

FCC BASIC QUALIFICATION QUESTION INSTRUCTIONS AND PROCEDURES WHEN ANSWERING "YES"

If the answer to the basic qualification question (felony question) is 'YES', submit as an exhibit a statement explaining the circumstances and a statement giving the reasons why the Applicant believes that grant of the application would be in the public interest notwithstanding the actual or alleged misconduct. If the Applicant responds 'YES' to this question and has previously provided a statement and explanation regarding the circumstances as an attachment to a prior application filed in ULS, and the facts and circumstances are unchanged, the Applicant may refer to the previous application by identifying the application file number and indicating the disposition of the prior application.

Find your FCC Application file number:

<http://wireless2.fcc.gov/UlsApp/ApplicationSearch/searchAdvanced.jsp>

Applicants can send the explanation and the application file number via e-mail to attach605@fcc.gov

The applicant is required to provide an explanation **within 14 days of the application data being submitted to FCC.**

Failure to do so may result in the application dismissal without action. The applicant must provide sufficient information for the FCC to determine whether there exists any material and substantial question of fact regarding whether the applicant has the character qualifications to be a Commission licensee.

There is no set checklist of items, but useful information includes:

- List of all felony charges of which you were convicted (this item is **Mandatory**)
- A detailed description of the conduct that resulted in the conviction or guilty plea, including time and place
- The date of the conviction or guilty plea
- The punishment that was imposed, and whether the sentence has been completed, or the applicant is still under any restriction or condition resulting from the conviction or guilty plea
- any efforts taken to remedy the wrongs committed and ensure that the applicant will not engage in such conduct in the future.

If the applicant does not request confidential treatment, the explanation will be publicly viewable in ULS. If the applicant requests that the explanation be confidential, it will not be visible to the public. However, in order to seek confidential treatment, the applicant must include a separate request that the material not be made available for public inspection. The request must contain a statement of the reasons for the request and identify the portion(s) of the response for which confidential treatment is requested. It is not sufficient to simply mark a document as "Confidential." All attachments, confidential or non-confidential should be accompanied by an application file number, to ensure that the explanation is attached to the proper filing.

**MARIN AMATEUR RADIO SOCIETY
CANIDATE RECORD SHEET**

NAME _____
CALL _____
DATE _____
EXAM CITY _____

SECTION 1 APPLICANT		ORG. MARS VE.		DATE
PRINT LAST NAME	SUFFIX	FIRST NAME	INITIAL	STATION CALL SIGN (LEAVE BLANK IF NONE)
MAILING ADDRESS (Number and Street or PO Box)				EXAMINATION CITY
CITY	STATE	ZIP CODE(9 digit)	DAYTIME PHONE Include Area Code	
EMAIL ADDRESS			NIGHT PHONE NUMBER Include Area Code	
NEW EXAM	UPGRADE	NAME CHANGE	ADDRESS CHANGE	RENEWAL
SECTION 2 PROCESSING				DHS FUNDED <input type="checkbox"/>
Do not write below this line				

Retain 0 Form 605 Section 1 *Filled out and signed* FRN

RETURN 1 Photo ID or two other ID # #

Retain 2 Photocopy of License Call Class: N T G A E

RETURN 3 Check original license Exp Good 2 Years

RETURN 4 (C) Current CSCE (S) Make copies/submit Exp Date Exp Date

Retain 5 (CT) Tech prior to 3/21/87 Proof submitted Element 3

Info 6 (CL)Expired licence proof submitted General Advanced Extra

Collect 7 Taking class Tech Gen collect fee fee prepaid receipt

Collect 8 Test fee Amount _____ Cash Check Check #

Collect 9 Retest fee Amount _____ Cash Check Check #

Make checks payable to SMRS

SECTION 3 TEST													
Take Today	Class	Elem	Qualifiers expire date		First Test			VE Initial	Re Test			VE Initial	CSCE
			License	Certificate	Ver	Pass	Fail		Ver	Pass	Fail		
	T	2											
	G	3											
	E	4											

SECTION 4 REMARKS/NOTES
Liaison notice to VEC sent