



CANDIDATE EXAMINATION ANSWER SHEET

THIS BOX IS FOR VE TEAM USE ONLY

Number _____	VE Initials: _____
Correct: _____	# 1 _____
Passed <input type="checkbox"/>	# 2 _____
Failed <input type="checkbox"/>	# 3 _____

CANDIDATE INFORMATION

Print clearly and legibly. Failure to do so may delay the processing of your application. Please provide all information requested.

Circle Exam Class: **Tech** **General** **Extra**

Test Design or Serial #
From Test Booklet _____

Name _____ Call Sign (if none, write none) _____

Email Address _____ (mandatory - print clearly)

FCC Registration Number (FRN) _____ (mandatory)

Complete Mailing Address (Street or Post Office Box #)

City, State, and ZIP Code _____

Phone: _____

Test Site (City, State): _____

Date of Test: _____

Signature: _____

TO PASS:

<u>Element</u>	<u>Class</u>	<u>Questions</u>	<u>Min. Right</u>	<u>Max. Wrong</u>
2	Technician	35	26	9
3	General	35	26	9
4	Extra	50	37	13

BLACKEN the correct letter

- | | |
|--|---|
| <p>1. A B C D</p> <p>2. A B C D</p> <p>3. A B C D</p> <p>4. A B C D</p> <p>5. A B C D</p> <p>6. A B C D</p> <p>7. A B C D</p> <p>8. A B C D</p> <p>9. A B C D</p> <p>10. A B C D</p> <p>11. A B C D</p> <p>12. A B C D</p> <p>13. A B C D</p> <p>14. A B C D</p> <p>15. A B C D</p> <p>16. A B C D</p> <p>17. A B C D</p> <p>18. A B C D</p> <p>19. A B C D</p> <p>20. A B C D</p> <p>21. A B C D</p> <p>22. A B C D</p> <p>23. A B C D</p> <p>24. A B C D</p> <p>25. A B C D</p> <p>26. A B C D</p> <p>27. A B C D</p> <p>28. A B C D</p> <p>29. A B C D</p> <p>30. A B C D</p> | <p>31. A B C D</p> <p>32. A B C D</p> <p>33. A B C D</p> <p>34. A B C D</p> <p>35. A B C D</p> <p>36. A B C D</p> <p>37. A B C D</p> <p>38. A B C D</p> <p>39. A B C D</p> <p>40. A B C D</p> <p>41. A B C D</p> <p>42. A B C D</p> <p>43. A B C D</p> <p>44. A B C D</p> <p>45. A B C D</p> <p>46. A B C D</p> <p>47. A B C D</p> <p>48. A B C D</p> <p>49. A B C D</p> <p>50. A B C D</p> |
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