



CANDIDATE EXAMINATION ANSWER SHEET

THIS BOX IS FOR VE TEAM USE ONLY

Number _____ VE Initials: _____
Correct: _____ # 1 _____
Passed ☐ # 2 _____
Failed ☐ # 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

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