

1. APPLICATION REQUIREMENTS:

Applications should be completed in English and certified translations provided for relevant documents.

		(Checklist- for Offici	ial use only)
1.1.		cation should be accompanied by a sworn affidavit g the documents listed therein in line with the template at below:	
1.2.	0 1	ersons not based in Kenya applying for Amateur Licenses	
	should not	arize all their documents.	
1.3.	Copies of	:-	
	1.3.1.	Kenyan National Identity Cards or Kenyan/Foreign	
		passports of the applicant or Parent/Guardian in case of Novice.	
	1.3.2.	Both sides of the ID should be copied onto the same side of an A4 size paper (only new generation IDs are acceptable)	
	1.3.3.	Passports copies should include pages showing the nationality, date of issue and expiry, holder's name, photograph and Kenyan Visa for foreigners.	
	1.3.4.	Certificate of a recognized Radio Amateur Examination or valid and current license.	
1.4.	Payment of	of a non-refundable application fee of KShs 1,000.00	

2. THE COMPLETED APPLICATION FORM SHOULD BE RETURNED TO: -

The Director, Frequency Spectrum Management, Communications Authority of Kenya 1st Floor, C.A. Centre, Waiyaki Way P. O. Box 14448, Westlands – 00800 Nairobi. Tel: 020-4242000/0703042000



3. TYPE OF AMATEUR LICENCE APPLIED FOR

(*Tick one only*)

PERMANENT AMATEUR LICENCE FOR KENYA NATIONALS	
AND RESIDENTS (renewable annually)	
TEMPORARY AMATEUR LICENCE FOR FOREIGNERS	
(valid for a maximum period of one year only from date of issue) Note:	
For foreigners there should exist diplomatic ties between the two	
countries and the applicant home license should meet Kenyan license	
qualifications and standards)	
NOVICE AMATEUR LICENCE FOR STUDENTS	
(Renewable Annually)	
	1

3. **PARTICULARS OF APPLICANT**

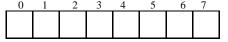
3.1. NAME OF APPLICANT AS IT APPEARS ON THE ID/PASSPORT

(The Applicant name should be written in CAPITALS and in full in the order it appears on the National ID/Passport)

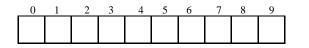
CALL SIGN (IF ANY):

LICENSE ISSUING AUTHORITY AND E-MAIL ADDRESS:

3.2. KENYA NATIONAL IDENTITY CARD NUMBER



3.3. OR PASSPORT NUMBER



3.4. APPLICANT DATE OF BIRTH

DD



..... YYYY

Revision 1

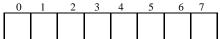


CA/F/FSM/02

4. PARENT/GUARDIAN CONTACT FOR NOVICE AMATEUR APPLICANTS

(All applications for Novice Amateur license MUST fill this part. Any change in the information given here should be communicated in writing to the Authority within one month *from the date of change)*

4.1. KENYA NATIONAL IDENTITY CARD NUMBER



4.2. OR PASSPORT NUMBER

0 1 2 3 4 5 6 7 8 9	
4.3. ADDRESS	
P. O. Box:	Postal Code:
Town:	Street/road:
Name of the Building:	L.R. no
Office:	Floor:
Telephone:	Mobile:
Email:	-
REFERENCES (for Kenyan residents only) 4.4. First Reference	
P. O. Box	Town
Telephone	Email
levision 1	2021



4.5. Second Reference

 Name_____

 P. O. Box_____

 Telephone_____

 Email_____

5. DECLARATION

I hereby certify the information I have provided in this application is true and correct to the best of my knowledge. I understand that it is an offence under the laws of Kenya to give false information in support of any application.

Name of Applicant		
Signature	Date	
(<i>For Novice applicant only</i>) Name of Parent/Guardian		
Signature	Date	



FOR OFFICIAL USE ONLY

The application MEETS/ DOES NOT MEET the Authority's requirements and is hereby APPROVED/NOT APPROVED as follows: -

The reasons	for not	approving the	e application	are as follows: -
The reasons	IOI HOU	uppio, mg une	uppiloution	are as rono ws.

Name of Approving Officer Designation	Name of Approving Officer	Designation
---------------------------------------	---------------------------	-------------

Signature_____Date ____

Official stamp _____

ANNEX 1: TEMPLATE OF THE AFFIDAVIT TO BE SUBMITTED

REPUBLIC OF KENYA

IN THE MATTER OF OATHS AND STATUTORY DECLARATIONS ACT CHAPTER 15, LAWS OF KENYA

AND	
IN THE MATTER OF AN APPLICATION FOR LICENSE FROM THE	
COMMUNICATIONS AUTHORITY OF KENYA	
<u>AFFIDAVIT</u>	
I,of Post Office Box	
Number (Town) (Postcoll do hereby make oath and state as follows: (Postcoll	ode)
1. THAT I am an adult of sound mind or a parent/guardian of	
(name of the novice for novice applications) and hence competent to swear this Affid	avit.
2. THAT I am a citizen of the and holder of	
National Identity Card No. (or Passport No.)	
3. THAT <u>(name of the applicant)</u> has resolved to make an application to the Authority for the operations of Amateur Radio Station licence.	
4. THAT I have submitted the following copies of our documents in support of the said application:	
 4.1. Registration and ownership status: 4.1.1 copies of Kenyan National Identity Cards (ID) or Kenyan passports for the Applicant: For foreigners, the copies of the passport should be notarized. 4.1.2 Passport copies pages showing the nationality, date of issue and expiry, name and photograph of holder. 4.1.3 Both sides of the National ID copied onto the same side of an A4 size paper, and 	

4.2 Certificate of a recolicense.	gnized Radio Amateur Examinat	ion or valid and current
	e documents listed in 4 above are he relevant authorities to the appl	1 0
6. THAT this Affidavit is (<i>Applicant's name</i>) ap	s sworn in support of plication for Amateur Radio Stat	ion licence.
7. THAT what is depon	ed to herein above is true and wi	thin my own knowledge.
SWORN at	by the said)
	(Deponent's name))
Thisday of	in the year) (Deponent's signature)
BEFORE ME))
)
COMMISSIONER FOR O	<u>ATHS</u>)
Drawn By:		
	(Law Firm)	
	(Physical Addres	55)
P. O. Box	(Town)	
(Postal Code)		

Note:

- 1. The advocate drawing up the affidavit should not belong to the same law firm as the commissioner of oaths commissioning the affidavit.
- 2. Select the appropriate choices in the case of parent/guardian for the novice applications