



National Volunteer Examiner Coordinator
W5YI-VEC
P.O. Box 200065 • Arlington TX 76006-0065
www.w5yi-vec.org

W5YI-VEC VE APPLICATION

Before filling out this application to become a Volunteer Examiner you **must** have read our Volunteer Examiners Manual on our web site at www.w5yi-vec.org and be thoroughly familiar with the FCC Part 97 Rules & Regulations, especially Subpart F, 97.501 through 97.527. Print must be Legible.

Name: _____ Call Sign/Class _____

Home Address: _____

City: _____ State: _____ Zip _____

Home Telephone: _____ Mobile (Daytime) Telephone: _____

Email: _____

By my signature below, I hereby certify that:

I am a currently licensed Amateur Radio Operator and agree to abide by the policies of the W5YI-VE Amateur Volunteer Examination Program.

I have never had my FCC station or operator license revoked or suspended, nor have I ever been discredited or refused VE accreditation by another VEC.

I am familiar with the FCC Rules concerning Amateur Radio operator license testing as defined in Title 47 C.F.R. Part 97, Subpart F.

I agree to administer all Amateur Radio examinations in accordance with these rules and the procedures established by the W5YI-VEC.

I understand that failure to comply with these procedures could result in being separated from the W5YI-VEC Volunteer Examination Program. Serious violations may result in suspension or revocation of my Amateur Radio station/operator license.

I understand the relationship between the VE and VEC is one of responsibility and trust. Each of us is free to terminate that relationship at any time and for any or no reason. I agree to accept the decisions of the W5YI-VEC and to release them from any liability associated with those decisions.

Signed _____ Date: _____
(over)

Welcome to the W5YI-VEC Program

Dear Applicant,

Thank you for making application to become a Volunteer Examiner on behalf of the W5YI-VEC.

We attempt to ensure that our Examiners, once accredited, become and stay active in the exam program. One method is by policy that all applications are signed by a sponsoring Contact Volunteer Examiner (CVE).

Please have the CVE responsible for the team you wish to participate with sign and date your application:

Contact Examiner Signature: _____

Contact Examiner Name (Printed): _____

Required CVE# _____ Date: _____

_____ I wish to order only a VE ID Badge and enclose \$3.00 for postage and handling.

VE Manual accessible on W5YI-VEC.org web site.

Payment: Check ___ Money Order ___ CVE Charge ___

Payment info if not on file:

Credit Card: _____ Exp: _____ CVV: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

**RETURN WITH A PHOTOCOPY OF YOUR AMATEUR OPERATOR
LICENSE TO:**

**W5YI-VEC
POB 200065
ARLINGTON, TEXAS 76006-0065**

**Please be sure to add our e-mail addresses: vec@w5yi.org and w5yi-vec@w5yi.org
to your recipients address list to prevent undeliverable mail if you are using SPAM
blocking through your email client or ISP**