



2025 YCARES Exam Session Schedule for Laurel VEC

Registration is required. To register, send an email to:

Jayne Wolf
YCARES Exam Session Manager for Laurel VEC
wolfj@yamhillcounty.gov

See the reverse side of this document for the registration form.

Apply for your FCC Registration Number (FRN) here: <https://apps.fcc.gov/cores/userLogin.do>

Email the completed registration form to the email address listed above.

Upgrading your license? Include a legible, signed copy of your FCC license with your registration form.

Date	Location	Address
Jan 18 th	McMinnville	Yamhill County Auditorium, 2050 NE Lafayette Ave.
Feb 15 th	McMinnville	Yamhill County Auditorium, 2050 NE Lafayette Ave.
Mar 15 th	Newberg	Newberg Public Safety Building, 401 E. 3rd St.
Apr 19 th	McMinnville	Yamhill County Auditorium, 2050 NE Lafayette Ave.
May 17 th	Newberg	Newberg Public Safety Building, 401 E. 3rd St.
Jun 21 st	McMinnville	Yamhill County Auditorium, 2050 NE Lafayette Ave.
Jul 19 th	Newberg	Newberg Public Safety Building, 401 E. 3rd St.
Aug 16 th	McMinnville	Yamhill County Auditorium, 2050 NE Lafayette Ave.
Sep 20 th	Newberg	Newberg Public Safety Building, 401 E. 3rd St.
Oct 18 th	Rickreall	Polk County Fairgrounds, 520 S Pacific Hwy W
Nov 15 th	Newberg	Newberg Public Safety Building, 401 E. 3rd St.
Dec 20 th	McMinnville	Yamhill County Auditorium, 2050 NE Lafayette Ave.

Laurel VEC Applicant Registration Form

Session Location	Session Date	Control Number
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Applicant Information

Last Name	Suffix	First Name	M.I.
Street Address			PO Box
City	State	Zip Code	
Telephone	E-Mail Address		

FCC Registration Number (FRN)

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Have you ever been convicted of a felony in any state or federal court? ☐ No ☐ Yes

- You **MUST** answer the above question if you are applying for a new license, upgrading an existing license, renewing your license, or applying for a call sign change. If you answer "Yes", then you must provide an explanation of the conviction to the FCC via mail or e-mail before your application will be processed by the FCC. If you fail to provide the explanation within 14 days, your application will be dismissed.
- DO NOT** answer the above question if all you are doing is changing your name or changing your mailing address.

Do you have another license application on file that has not been acted upon? ☐ No ☐ Yes

If yes, what is the purpose of the other application? (Check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> New License | <input type="checkbox"/> Upgrade License Class | <input type="checkbox"/> Vanity Call Sign |
| <input type="checkbox"/> Renew License | <input type="checkbox"/> Change Name or Contact Info | <input type="checkbox"/> Change Call Sign Systematically |

Application File Number

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Current License Information

Call Sign	Class:	Expiration Date (MM/DD/YYYY)		/		/				
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Desired Exams/Actions (Check All That Apply)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Technician Exam (Element 2) | <input type="checkbox"/> General Exam (Element 3) | <input type="checkbox"/> Amateur Extra Exam (Element 4) | |
| <input type="checkbox"/> Renew License | <input type="checkbox"/> Change Name | <input type="checkbox"/> Change Contact Info | <input type="checkbox"/> Change Call Sign |

For Volunteer Examiner Use Only

ID Check			License Check		
VE #1	VE #2	VE #3	VE #1	VE #2	VE #3

Comments

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