

**New Hampshire Department of Safety  
COMT/RADO Application**



**RADO**

**COMT**

**Last Name**

**First Name**

**Middle Initial**

**Job Title**

**Amateur License Type**

**Agency Name**

**Call Sign**

**Agency Address (Street, City/Town, County, State, Zip Code)**

**Home Address (Street, City/Town, County, State, Zip Code)**

**Email**

**Work Phone**

**Cell Phone**

**Pre-requisites**

*Copies of prerequisite documentation which verify the applicant has met the prerequisites and are eligible to participate in the course must be submitted along with the application. Registration is not complete until all documentation has been received and verified.*

IS-100

IS-700

IS-200

IS-800