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|  | | | APPLICATION FORM | | | | | | | | | | | | | | | | | | | | | | | | | PHOTO | | |
| Family Name | | | | | First Name | | | | | | | Position applied for: | | | | |  | | | Readiness Date: | | | | |  | | |
|  | | | | |  | | | | | | | Second choice: | | | | |  | | | Expected Salary: | | | | |  | | |
| Identity Documents | | | Number | | Issued | | Place | | Expire | | | Ship type: | | | | |  | | | Location Country: | | | | |  | | |
| Tourist passport: | | |  | |  | |  | |  | | | Engine type: | | | | |  | | | Location City: | | | | |  | | |
| Seaman's Book: | | |  | |  | |  | |  | | | Level of English: | | | | |  | | | Nearest airport: | | | | |  | | |
| CoC: | | |  | |  | |  | |  | | | US Visa: | | | | |  | | | Schengen Visa: | | | | |  | | |
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| Home  Address |  | | | | | | | | | WhatsApp: | | | | |  | | | | Teams: | | |  | | | | | DOB: | | |  |
| Email: | | |  | | | | | | Viber: | | |  | | | | | Phone: | | |  |
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| Reference (name of Company): | | | |  | | | | | | | | | | | Reference (name of Company): | | | | | | | |  | | | | | | | |
| Address, phone: | | | |  | | | | | | | | | | | Address, phone: | | | | | | | |  | | | | | | | |
| Name of person, email: | | | |  | | | | | | | | | | | Name of person, email: | | | | | | | |  | | | | | | | |

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| Certificates of Competency (COC) | | | | | Certificate No | Date of Issue | | | Place of Issue | | Date of Expire | | | Certificate Title | | | Certificate No | | | | Date of Issue | | Place of Issue | | Date of Expire | | |
| CoC: | | | | |  |  | | |  | |  | | | ECDIS specific: Furuno | | | |  | |  | | |  | |  | | |
| Endorsement: | | | | |  |  | | |  | |  | | | ECDIS specific: Navi Sailor | | | |  | |  | | |  | |  | | |
| GMDSS: | | | | |  |  | | |  | |  | | | ECDIS specific: JRC | | | |  | |  | | |  | |  | | |
| Endorsement: | | | | |  |  | | |  | |  | | | ECDIS specific: | | | |  | |  | | |  | |  | | |
| ECDIS Generic: | | | | |  |  | | |  | |  | | | ECDIS specific: | | | |  | |  | | |  | |  | | |
| Certificate Title | | | | | Certificate No | Date of Issue | | | Place of Issue | | Date of Expire | | | Certificate Title | | | Certificate No | | | | Date of Issue | | Place of Issue | | Date of Expire | | |
| Basic Safety Training | | | | |  |  | | |  | |  | | | Bridge team and resource management | | |  | | | |  | |  | |  | | |
| Proficiency in survival craft other than fast | | | | |  |  | | |  | |  | | | Radar, radar plotting and use of ARPA | | |  | | | |  | |  | |  | | |
| Proficiency in fast rescue boats | | | | |  |  | | |  | |  | | | Ship Handling & Manoeuvring | | |  | | | |  | |  | |  | | |
| Advanced Fire Fighting | | | | |  |  | | |  | |  | | | Engine Room resource management | | |  | | | |  | |  | |  | | |
| Medical First Aid on board ship | | | | |  |  | | |  | |  | | | High Voltage electrical equipment | | |  | | | |  | |  | |  | | |
| Medical Care on board ship | | | | |  |  | | |  | |  | | | Ships Carrying Dangerous Hazard Cargo | | |  | | | |  | |  | |  | | |
| Security familiarization and awareness | | | | |  |  | | |  | |  | | | Designated Security Duties | | |  | | | |  | |  | |  | | |
| **Remarks (anything in red ink - not ready yet)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Height: |  | Steam Turbine: | ☐ | Electronic ME: | | | ☐ | USA: | |  | | ECDIS: | | |  | Automatic review | | | | | | | | | | |
| Weight: |  | FRAMO: | ☐ | Dry Docking: | | | ☐ | China: | |  | | Multi Crew: | | |  | Do you wish to be considered for future vacancies? | | | | | | | | YES ☐ | | NO ☐ |
| Overall: |  | Centrif.Pumps: | ☐ | Alpha Lubr: | | | ☐ | Canada: | |  | | Cargo Types: | | |  | If YES, please give any alternative Contact Name not shown in Sec. 2 | | | | | | | | | | |
| Shoes: |  | Screw Pumps: | ☐ |  | | | ☐ | Australia: | |  | |  | | |  | Name: | | | | | | Phone: | | | | |
| **Declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I hereby declare that the above particulars are true and authorize you to contact the referees listed above. | | | | | | | | | | | | | \_\_\_\_     \_\_\_\_sign | | | | | | \_\_\_\_     \_\_\_\_date | | | | | | | |