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# **APPLICATION FORM**

1	Position	identity card PIN Number 5883ACA
	Position Applied for:	Officer in charge of a navigational watch
	Date Available from:	15.02.2024

First Name: SUMMAT	Last Name: BAGIROV
Date of Birth: 09.02.1992	Place of Birth (City and Country): Azerbaijan, LANKARAN
Email:summet.bagirov@mail.ru	Mobile Number: (+994) 51 881 17 99
Permanent Adress: Lankaran d, Boladi v	Expected Salary Per Month: 2500\$
Nationality: Azerbaijan	Alternative rank applying for: Officer in charge of a navigational watch

3	Family Details: (If Unmarrie	ed kindly give details of Fa	ather / Mother)		
	First Name	Last Name	Gender	Relation	Contact
	Qalib	Bagirov	Male	Brother	050 792 24 07

Maritime Education				
Name of school	Country	From	То	Type of degree or diploma
HPKSKI	Ukraine	2017	2021	Bachelor

Physical Data	
Height	180
Weight	85
Boilersuit Size	XXL
Shoes Size	44
Blood group	A(II)RH-
Additional Physical Information:{You can write an	y other information you want to add about your physique in this field.}

#### 6 Seamens Book & Identify Docs

Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair Sale & Purchasing Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE O	F ISSUE	DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 0239	002	27.05.2023	Azerbaijar	1	27.05.2028
Certificate of Competency	Azerbaijan	0008007		17.11.2023	Azerbaijar	ו	17.11.2028
Respublic Of Azerbaijan	Azerbaijan	C031436	55	23.02.2021	Azerbaija	n	22.02.2031
Do you hold a US V	isa 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US V	isa 'B1/B2'?	YES/NO	NO	Issue Date:	-	Expiry	Date:-
Have you been reject	cted for any visa a	pplied for?		YES/NO	NO		
If YES, please state	the country and re	easons		-			

# 7 Professional Test

<b>Professional Test Date</b>	Name of Test	Score
-	-	-

### 8 Licences

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijjan	ASMA,BAKU	17.11.2028
Flag State Endorsements	-	-	-

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STCW Certificates & Trainings					
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-1170-23	CMS	14.03.2023	09.03.2028
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1170-23	CMS	14.03.2023	09.03.2028
ELEMENTARY FIRST AID	Azerbaijan	SO-1170-23	CMS	14.03.2023	09.03.2028
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1170-23	CMS	14.03.2023	09.03.2028
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1170-23	CMS	14.03.2023	09.03.2028
International Safety Managment	Azerbaijan	SP-0987-23	CMS	29.03.2023	28.03.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1034-23	CMS	16.03.2023	16.03.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-0925-21	CMS	03.08.2021	03.08.2026
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-2540-23	CMS	18.09.2023	18.09.2028
Ship Security Officer	Azerbaijan		CMS		
Leadership & Teamwork	Azerbaijan	DL-0723-23	CMS	01.09.2023	01.09.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-1045-23	CMS	16.08.2023	16.08.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0962-23	IST	24.11.2023	24.11.2028
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan		CMS		
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan		CMS		
Medical First Aid	Azerbaijan	SN-1268-23	CMS	22.08.2023	22.08.2028
Medical Care	Azerbaijan		CMS		
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0466-23	CMS	01.09.2023	25.08.2028
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SR-0176-23	CMS	15.09.2023	15.09.2028
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0530-23	CMS	29.09.2023	29.09.2028
Bridge Resource Management	Azerbaijan	SW-0357-23	CMS	23.08.2023	23.08.2028
Ship Handling and Maneuvering	Azerbaijan		CMS		

Eugenie-room resource management;(STCW Code, A-III/1, III/2, III/3, VIII/2)	Azerbaijan				
Proficiency in Fast Rescue Boats	Azerbaijan	SU-0084-22	CMS	13.04.2022	30.03.2027
Dangerous, hazardous harmful cargoes	Azerbaijan		IST		

Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair Sale & Purchasing Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

Tel: +994 51 277 19 31

Address: AZ1075, Azerbaijan, Baku, Yusif Vazir Chemenzemenli 119c, Afen Plaza Business Center 5nd floor, apt 13 Email: crewing@unitedalliancegroup.com

#### **Seagoing Experience**

(Please give a full record starting with the last vessel on which you served)

COMPANY	Name of vessel	Flag	Vessel's Type	DWT	Eng Type	GRT	TEU	Rank	From m/d/y	To m/d/y	Total m/d	REASONS FOR S/OFF
BUE CASPIAN	Caspian Protector	Azerbaijan	Standbuy RRV	2108	Caterpillar			AB	08.2016	08.2023	85 month	End of Contract
				///								
				/A 12								
			1001									
							Th					

Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply

Yacht Management **Technical Management** Ship Brokering Surveying & Monitoring New Building & Repair

Sale & Purchasing Ship Agency Exclusive Cargo Brokering **Bunker Supply** Technical Services

Address: AZ1075, Azerbaijan, Baku,Yusif Vazir Chemenzemenli 119c,Afen Plaza Business Center 5nd floor,apt 13 Email: crewing@unitedalliancegroup.com Tel: +994 51 277 19 31

Purifiers and Boilers	-				
Type of Cranes / No of Reefer Containers	-				
Other Experience					
-					
Travel Documents					
Name		YES/NO	Country	Date pf	Expire
Schengen		YES/NO	NO		•
US		YES/NO	NO	-	
China		YES/NO	NO	-	
Australia		YES/NO	NO	-	
Insurance,Health Related	Documentation				
Medical Certificate (Fit for D	Outy)			YES/NO	YE
		Vaccina	ation		
Yellow Fever COVID-19				YES/NO YES/NO	N( YE
e answer is YES to any of the	e above, please give	e full details and att	ach a separate page if n	ecessary)	
Medical history					
Have you ever signed off a	•			YES/NO	
Have you ever signed off a Have you undergone any o	peration in the past	?		YES/NO	No No
Have you ever signed off a Have you undergone any op Have you consulted a doctor	peration in the past or during the last 12	? months for an illne	ss/accident?	YES/NO YES/NO	N/
Have you ever signed off a Have you undergone any op Have you consulted a doctor Do you have any health or of	peration in the past or during the last 12 disability problems	? months for an illne	ess/accident?	YES/NO YES/NO YES/NO	N N
Have you ever signed off a Have you undergone any op Have you consulted a doctor	peration in the past or during the last 12 disability problems in as regularly?	? months for an illne now?		YES/NO YES/NO YES/NO YES/NO	N N
Have you ever signed off a Have you undergone any op Have you consulted a doctor Do you have any health or op Do you take any medication	peration in the past or during the last 12 disability problems in as regularly?	? months for an illne now?		YES/NO YES/NO YES/NO YES/NO	N
Have you ever signed off a Have you undergone any op Have you consulted a doctor Do you have any health or op Do you take any medication	peration in the past or during the last 12 disability problems in as regularly?	? months for an illne now?		YES/NO YES/NO YES/NO YES/NO	N N N
Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication  (If the answer is YES to a  General  Have you ever been the sub	peration in the past or during the last 12 disability problems in regularly?  any of the above, plupiect of a court of en	? months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary)	N N N
Have you ever signed off a Have you undergone any op Have you consulted a doctor Do you have any health or of Do you take any medication  (If the answer is YES to a	peration in the past or during the last 12 disability problems in regularly?  any of the above, plupiect of a court of en	? months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO YES/NO page if necessary)	N N N
Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication  (If the answer is YES to a  General  Have you ever been the sub	peration in the past or during the last 12 disability problems in regularly?  any of the above, plusted of a court of ensional license suspensional license suspensional desired in the past of the past of the last of the la	months for an illne now? ease give full detaination of the second of the	Is and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary)	N N N
Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication  (If the answer is YES to a  General  Have you ever been the sub Have you ever had a profess	peration in the past or during the last 12 disability problems in regularly?  any of the above, plusted of a court of ensional license suspensional license suspensional desired in the past of the past of the last of the la	months for an illne now? ease give full detaination of the second of the	Is and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary)	N N N

Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply

Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair

Sale & Purchasing **Ship Agency** Exclusive Cargo Brokering Bunker Supply Technical Services 16 References (Please give the name and address of your current or immediate past employer)

Name of company	1.BUE CASPIAN	2.
Name of person to contact	Veli Mammadov	
Address	Nizami street ,ISR Plaza	
☎ No.	+994 50 255 41 32	

17 Declaration

I hereby declare that the above particulars are true and authorise you to contact the referees listed above.

I have read it, I am familiar with it, I confirm with my signature.

22.12.2023 Date: