



APPLICATION FORM

1	Position	identity card PIN Number 51B1XBV
	Position Applied for:	Able Seafarer - Engine
	Date Available from:	30.12.2023

Gender: Male 2 **Personal Infromation** Last Name: NABIYEV **First Name: TAHIR** Date of Birth: 05.03.1986 Place of Birth (City and Country): Azerbaijan, Email: Mobile Number: (+994) 55 54175 16 Permanent Adress: Zabrat 1, Ruhullah **Expected Salary Per Month:** 1300\$ street, home 21 Nationality: Azerbaijan Alternative rank applying for: Able Seafarer-Engine Person to call in emergency: (+994) 51 839 1949 Wife

Family Details: (If Unmarried kindly give details of Father / Mother)

First Name Last Name Gender Relation Contact

Arzu Nabiyeva Female Wife 051 839 1949

Name of school

Azerbaijan
Maritime College

Country

Azerbaijan
Azerbaijan

Azerbaijan
College

Azerbaijan
College

Height

Height

To

Weight

Boilersuit Size

Shoes Size

Blood group

A(II)RH
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}

Seamens Book & Identify Docs

DATE OF JOSUS DATE OF

DOCUMENT COUNTRY NUMBER DATE OF ISSUE PLACE OF ISSUE EXPIRY

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Seaman Book	Azerbaijan	DQK 0258	352	24.11.2023	Azerbaijan		24.11.2028
Certificate of Competency	Azerbaijan	RP09480		24.06.2019	Azerbaijan		24.06.2029
Republic of Azerbaijan	Azerbaijan	C0233420	06	17.06.2019	Azerbaijan		16.06.2029
Do you hold a US Vis	a 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	a 'B1/B2'?	YES/NO	NO	Issue Date:	-	Expiry	Date:-
Have you been reject	ed for any visa app	lied for?		YES/NO	NO		
If YES, please state the	ne country and reas	sons		-			

Professional Test

Professional Test Date	Name of Test	Score
-	-	-

Licences

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijan	ASMA, BAKU	24.06.2029
Flag State Endorsements	-	-	-

STCW Certificates & Trainings					
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-5737-23	UAG	15.12.2023	15.12.2028
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-5737-23	UAG	15.12.2023	15.12.2028
ELEMENTARY FIRST AID	Azerbaijan	SO-5737-23	UAG	15.12.2023	15.12.2028
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-5737-23	UAG	15.12.2023	15.12.2028
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-5737-23	UAG	15.12.2023	15.12.2028
International Safety Management	Azerbaijan	SP-3419-23	UAG	20.10.2023	19.10.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-4184-23	UAG	30.11.2023	30.11.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-3412-23	UAG	27.10.2023	27.10.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-3004-23	UAG	17.11.2023	17.11.2028
Ship Security Officer	Azerbaijan		UAG		
Leadership & Teamwork	Azerbaijan		UAG		
Advanced Training in Fire Fighting	Azerbaijan		UAG		
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan		UAG		
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan		UAG		
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan		UAG		
Medical First Aid	Azerbaijan		UAG		
Medical Care	Azerbaijan		UAG		
Global Maritime Distress and Safety System general operator	Azerbaijan		UAG		
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan		UAG		
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan		UAG		
Bridge Resource Management	Azerbaijan		UAG		
Ship Handling and Maneuvering	Azerbaijan	_	UAG		
Eugenie-room resource management;(STCW Code, A-III/1, III/2, III/3, VIII/2)	Azerbaijan				
1000v	Azerbaijan				

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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
Ranmarin	Cengiz bey	Liberia				13000		Motorman			12 month	End of Contract
Ranmarin	Halit bey	Liberia				13000		Motorman			10 month	End of Contract
Ranmarin	Berkay	Liberia				13000		Motorman			1 month	xestelenib
Ranmarin	Adnan	Liberia				13000		Motorman			8 month	End of Contract
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Generators					
Purifiers and Boilers	_				
Type of Cranes / No of					
Reefer Containers	-				
Other Experience					
-					
Travel Documents					
		VECANO	C 4	Data of F	!
Name Schengen		YES/NO YES/NO	Country NO	Date pf E	xpire
US		YES/NO	NO	-	
China		YES/NO	NO	-	
Australia		YES/NO	NO	-	
Insurance,Health Related D	Documentation				
Medical Certificate (Fit for Du	uty)			YES/NO	Y
Yellow Fever		Vaccin	ation	\/=0#10	
COVID-19				YES/NO YES/NO	Y
Medical history					
Have you ever signed off a s	hip due to medica	Il reasons?		YES/NO	1
Have you undergone any on	eration in the past			YES/NO	1
	during the last 12	2 months for an illne	ess/accident?	YES/NO	
Have you consulted a doctor				\	
Have you consulted a doctor Do you have any health or di	isability problems			YES/NO	1
Have you consulted a doctor Do you have any health or di Do you take any medications	isability problems s regularly?	now?		YES/NO	1
Have you consulted a doctor Do you have any health or di	isability problems s regularly?	now?		YES/NO	1
Have you consulted a doctor Do you have any health or di Do you take any medications	isability problems s regularly?	now?		YES/NO	1 1
Have you consulted a doctor Do you have any health or di Do you take any medications (If the answer is YES to an	isability problems s regularly? ny of the above, p	now? lease give full deta	ils and attach a separate	YES/NO page if necessary)	1
Have you consulted a doctor Do you have any health or di Do you take any medications (If the answer is YES to an General Have you ever been the subje	isability problems s regularly? ny of the above, p ect of a court of er	now? lease give full deta	ils and attach a separate	YES/NO page if necessary) YES/NO	1
Have you consulted a doctor Do you have any health or di Do you take any medications (If the answer is YES to an	isability problems s regularly? ny of the above, p ect of a court of er	now? lease give full deta	ils and attach a separate	YES/NO page if necessary)	1
Have you consulted a doctor Do you have any health or di Do you take any medications (If the answer is YES to an General Have you ever been the subje	isability problems s regularly? ny of the above, p ect of a court of er ional license susp	now? lease give full deta nquiry or involved in ended or revoked?	ils and attach a separate	YES/NO page if necessary) YES/NO	1
Have you consulted a doctor Do you have any health or di Do you take any medications (If the answer is YES to an General Have you ever been the subjections Have you ever had a professions	isability problems s regularly? ny of the above, p ect of a court of er ional license susp	now? lease give full deta nquiry or involved in ended or revoked?	ils and attach a separate	YES/NO page if necessary) YES/NO	1

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Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

Name of company	1	2.	
Name of person to contact	-		
Address	-		
☎ No.	-		
•	•	norise you to contact the referees listed abo	ove.
I hereby declare that the abo	ve particulars are true and aut	•	ove.
I hereby declare that the abo	•	•	ove.

Date:

01.01.2024

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Signature

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