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APPLICATION FORM

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| R | P | 0 | 3 | 8 | 7 | 2 | | | | | |
| Personal ID Number | | | | | | | | | | | |

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|----------------------|----------------------|
| Position Applied for | Date Available from: |
|----------------------|----------------------|

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| 1. Personal Data | | |
| Family Name: VASIF | First Name: SHUKUROV | Middle Name: |
| Date of Birth: 05.09.1984 | Place of Birth (City and Country): Azerbaijan KHUDAT | Citizenship: Azerbaijan |
| Permanent Address: AZERBAIJAN City KHUDAT | | Phone (Home): +99477-527-01-59 Phone (Business/Mob) +99455-814-15-59 E-mail: |

| | | | | | |
|--|-------------|-------------------|-------------|-------------|---------------------------|
| 2. Maritime Education | | | | | |
| Name of school | Town | Country | From | To | Type of degree or diploma |
| Azerbaijan Marine Fishing Industrial Technical School | Baku | Azerbaijan | 2008 | 2009 | “Ships engineer” |
| | | | | | |

| | | |
|-----------------------------|--------------|-------|
| 3. Professional Test | | |
| English Test Date | Name of Test | Score |
| Professional Test Date | Name of Test | Score |
| Professional Interview Date | Result | |

| | | | | | |
|---|-------------------|--|--|--------------|--|
| 4. Family Details | | | | | |
| Civil Status(Single, Married, Separated, Divorced, Widowed) : | | | | | |
| Next of Kin (the first emergency contact) | | | | Relationship | |
| Address of Residence | | | | Phone : | |
| | FATHER | | | | |
| Family Name | ASIF | | | | |
| First Name | SHUKUROV | | | | |
| Date of Birth | 05.09.1995 | | | | |
| City of living | KHUDAT | | | | |

| | | | | | |
|----------------------|------------------|--|--|--|--|
| Phone Numbers | +99455-975-47-98 | | | | |
|----------------------|------------------|--|--|--|--|

5. Identity Documents

| Document | Country | Number | Place of Issue | Issue Date | Expiry Date |
|-----------------|-------------|------------|----------------|------------|-------------|
| Seaman's Book | AZERIBAIJAN | DQK 016655 | AZERIBAIJAN | 30.10.2020 | 30.10.2025 |
| Travel Passport | AZERIBAIJAN | P 5280070 | AZERIBAIJAN | 15.02.2013 | 13.02.2023 |
| Civil Passport | AZERIBAIJAN | AA 0615237 | AZERIBAIJAN | 10.10.2019 | 10.10.2029 |

6. Valid Visa

| | | |
|--|--|--|
| | | |
| | | |
| | | |

7. Courses Attended and Certificates Obtained

| Document | Number | Dates | | Place |
|---|------------|------------|------------|------------|
| | | Issue | Expiry | |
| Certificate of Competency | | | | |
| Maltese Endorsement of COC | | | | |
| Oil Tanker Endorsement | | | | |
| Chemical Tanker Endorsement | | | | |
| Gas Tanker Endorsement | | | | |
| Oil Tanker Familiarization Training | | | | |
| Chemical Tanker Familiarization Training | | | | |
| Gas Tanker Familiarization Training | | | | |
| Oil Tankers Specialized Training | | | | |
| Chemical Tanker Specialized Training | | | | |
| Gas Tanker Specialized Training | | | | |
| Basic Trainings | | | | |
| Proficiency in Survival Craft and Rescue Boats | SL-1517-19 | 04.12.2019 | 04.12.2019 | Azerbaijan |
| Traning in advanced fire-fighting | SJ-1056-19 | 20.12.2019 | 20.12.2024 | Azerbaijan |
| Medical First Aid Training | SN-0887-19 | 27.12.2019 | 27.12.2024 | Azerbaijan |
| Medical First Aid Training and Medical Care | SO-0541-20 | 13.03.2020 | 06.03.2025 | Azerbaijan |
| Engine resource management | ER-0244-19 | 06.12.2019 | 06.12.2024 | Azerbaijan |
| Safe operation and maintenance of high voltage systems 1000 volts or more | DM-0006-20 | 20.02.2020 | 20.02.2025 | Azerbaijan |
| GMDSS | | | | |
| GMDSS Endorsement | | | | |
| Radar Observation & Plotting | | | | |
| Automatic Radar Plotting Aids Simulator (ARPA) | | | | |
| Bridge Team Management | | | | |
| Shiphandling & Maneuvering | | | | |
| Ship Security Officer Training Course | | | | |
| Maltese Endorsement of SSO | | | | |
| ISM Code | SP-0115-20 | 03.02.2020 | 29.01.2025 | Azerbaijan |
| Leadership and Teamwork | DL-0378-19 | 26.12.2019 | 26.12.2024 | Azerbaijan |
| Safety Officer | | | | |
| ECDISTraining Course | | | | |
| Risk Assessment Course | | | | |
| C.O.W./ I.G.S | | | | |
| Fire Practice on Tankers | | | | |
| Vapour Recovery System | | | | |
| Unmanned Machinery Space | | | | |
| FRAMO Familiarization Course | | | | |
| Cargo Ballast Operations on Oil/Chemical Tankers | | | | |

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|--|------------|------------|------------|------------|
| Hazardous Materials | | | | |
| Welder | | | | |
| Turner | | | | |
| Risk Management And Incident Investigation | | | | |
| Training of seafarers with designated security duties in compliance with ISPS Code | SH-0077-20 | 31.01.2020 | 24.01.2025 | Azerbaijan |

8. Physical Data

| | |
|-----------------|-------|
| Height | 175 |
| Weight | 65 |
| Colour of Hair | black |
| Colour of Eyes | brown |
| Boilersuit Size | 43 |
| Shoes Size | 43 |

9. Medical History

| | Yes | No |
|--|-----|----|
| Have you ever signed off a ship due to medical reasons? | | |
| Did you undergo any medical operation in the past? | | |
| Have you consulted a doctor during the last 12 months for an illness/accident? | | |
| Do you have any health or disability problems now? | | |

If yes, please give full details:

| | | |
|-----------------------------------|---------|-------------|
| | Passed: | Valid till: |
| International Medical Examination | | |
| Vaccination Against Yellow Fiver | | |
| Vaccination Against Diphtheria | | |
| | | |

10. References (please give name and address of your current or past employer)

Office remarks

| | | |
|---------------------------|--|--|
| Name of Company | | |
| Name of person to contact | | |
| Address | | |
| Phone | | |
| Name of Company | | |
| Name of person to contact | | |
| Address | | |
| Phone | | |

11. Bank address for allotments

| | |
|--------------|--|
| Beneficiary | |
| Account No. | |
| Name of Bank | |
| Bank Address | |

12. Knowledge and experience

| | Yes | No |
|--|-----|----|
|--|-----|----|

