



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



## APPLICATION FORM

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<b>Position</b>		<b>identity card PIN Number 69R8HFP</b>
<b>Position Applied for:</b>	Officer in charge of an engineering watch	
<b>Date Available from:</b>	07.01.2024	

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: XAYAL</b>	<b>Last Name: MAMMADZADA</b>	
Date of Birth: 27.07.1998	Place of Birth (City and Country): Azerbaijan, SALYAN	
Email: xeyal.memmedzade@mail.ru	Mobile Number: (+994) 55 235 24 47	
Permanent Address: Absheron d, Khirdalan city, Gencler sheherciyi , home 48	Expected Salary Per Month: 3000\$	
Nationality: Azerbaijan	Alternative rank applying for: Officer in charge of an engineering watch	
<b>Person to call in emergency: (+994) 55 893 69 62 Father</b>		

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<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
<b>First Name</b>	<b>Last Name</b>	<b>Gender</b>	<b>Relation</b>	<b>Contact</b>
Mubariz	Mammadov	Male	Father	055 893 69 62

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<b>Maritime Education</b>				
<b>Name of school</b>	<b>Country</b>	<b>From</b>	<b>To</b>	<b>Type of degree or diploma</b>
Azerbaijan State Marine Academy	Azerbaijan	2015	2020	Bachelor

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<b>Physical Data</b>	
Height	170
Weight	70
Boilersuit Size	M
Shoes Size	40
Blood group	B(III)RH+
Additional Physical Information: {You can write any other information you want to add about your physique in this field.}	

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<b>Seaman's Book &amp; Identify Docs</b>
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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 OF ISSUE	DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 021756	25.10.2022	Azerbaijan	25.10.2027
Certificate of Competency	Azerbaijan	0007922	15.08.2023	Azerbaijan	15.08.2028
Republic of Azerbaijan	Azerbaijan	C03119864	15.09.2020	Azerbaijan	14.09.2030
Do you hold a US Visa 'C1/D'?		YES/NO	NO	Issue Date:	-
Do you hold a US Visa 'B1/B2'?		YES/NO	NO	Issue Date:	-
Have you been rejected for any visa applied for?			YES/NO	NO	Expiry Date:-
If YES, please state the country and reasons			-		

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## Professional Test

Professional Test Date	Name of Test	Score
-	-	-

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## Licences

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijan	ASMA, BAKU	15.08.2028
Flag State Endorsements	-	-	-

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## STCW Certificates &amp; Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-3550-22	IST	09.08.2022	08.08.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-3550-22	IST	09.08.2022	08.08.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-3550-22	IST	09.08.2022	08.08.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-3550-22	IST	09.08.2022	08.08.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-3550-22	IST	09.08.2022	08.08.2027
International Safety Management	Azerbaijan	SP-1821-23	IST	13.06.2023	13.06.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2318-22	IST	11.08.2022	11.08.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-1917-22	IST	10.08.2022	09.08.2027
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1386-23	IST	09.06.2023	09.06.2028
Ship Security Officer	Azerbaijan		IST		
Leadership & Teamwork	Azerbaijan	DL-0471-23	IST	08.06.2023	08.06.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-1565-22	IST	28.10.2022	28.10.2027
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan		IST		
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan		IST		
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan		IST		
Medical First Aid	Azerbaijan	SN-0906-23	IST	14.06.2023	12.06.2028
Medical Care	Azerbaijan		IST		
Global Maritime Distress and Safety System general operator	Azerbaijan		IST		
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan		IST		
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan		IST		
Eugenie-room resource management;(STCW Code, A-III/1, III/2, III/3, VIII/2)	Azerbaijan	ER-0155-23	IST	02.06.2023	02.06.2028

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

[illegible]

- 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](mailto:crewing@unitedalliancegroup.com)    **Tel:** +994 51 277 19 31

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**For Engineers (Please provide details)**

Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

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**Other Experience**

-
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**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	-

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**Insurance,Health Related Documentation**

Medical Certificate (Fit for Duty)	YES/NO	YES
<b>Vaccination</b>		
Yellow Fever	YES/NO	NO
COVID-19	YES/NO	YES

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

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**Medical history**

Have you ever signed off a ship due to medical reasons?	YES/NO	NO
Have you undergone any operation in the past?	YES/NO	NO
Have you consulted a doctor during the last 12 months for an illness/accident?	YES/NO	NO
Do you have any health or disability problems now?	YES/NO	NO
Do you take any medications regularly?	YES/NO	NO

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

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**General**

Have you ever been the subject of a court of enquiry or involved in a maritime accident?	YES/NO	NO
Have you ever had a professional license suspended or revoked?	YES/NO	NO

(If YES, please give full details and attach a separate page if necessary)

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Yacht Management  
Technical Management  
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Surveying & Monitoring  
New Building & Repair

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**References** (Please give the name and address of your current or immediate past employer)

Name of company	1. CMS	2.
Name of person to contact	CHIF ENG Murad ALIZADA	
Address	-	
☎ No.	055 896 72 32	

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**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.



Signature

Date: 07.01.2024

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