



Application Form

Section 1		Enginner	
<i>Position Applied for</i>	3 nd Enginner		
<i>Lowest Position Acceptable</i>	3 nd Enginner		
<i>Date of Availability</i>	Any time		
Section 2		Personal Details	
<i>Family name / Surname</i>	ISRAFILOV		
<i>First Name / Given Name</i>	RASIM		
<i>Date & Place of Birth</i>	Date: 04.01.1983 Place: Baku ,Azerbaijan		
<i>Nationality</i>	Azerbaijan		
<i>Permanent Address</i>	3,2 Aliyev4, a. HUSEYNZADA str, YASAMAL district, BAKU,AZERBAIJAN		
<i>Present Address</i>	3,2 Aliyev4, a. HUSEYNZADA str, YASAMAL district, BAKU,AZERBAIJAN		
PPE information	<u>SAFETY SHOES SIZE</u>	43	<u>COVERALL SIZE</u> XL
<i>Present Contact Number</i>			
<i>Mobile Number</i>	+994 55 70 383 81 83		
<i>SKYPE ADDRESS</i>	N/A		
<i>Email Address</i>	Rasim.israfilov05@gmail.com		
<i>Nearest Airport (and Distance)</i>	Haydar Aliyev Baku International (GYD)		
Section 3		Passport and VISA details	
<i>Country of Issue</i>	Azerbaijan / Baku	<i>USA Visa - Type</i>	
<i>Date Issued</i>	03/07.2014	<i>USA VISA Expires</i>	
<i>Place Issued</i>	Azerbaijan	<i>USA Visa - Type</i>	
<i>Passport Number</i>	C00473464	<i>USA VISA Expires</i>	
<i>Passport –Expires</i>	02.07.2024	<i>Other Country Visa</i>	
<i>Secondary passport or Dual nationality</i>	N/A	<i>Visa Expiry</i>	
Section 4 (hi-light as required)		Seaman book / Discharge book / Seaman Record Book / CDC	
<i>Issuing Country & Place</i>	Azerbaijan	<i>Date Issued</i>	15.12.2021
<i>Number</i>	DQK 018894	<i>Expiry Date (if any)</i>	15.12.2026
Section 5		Next of Kin – this is important information we require- Don't ignore it	

Full Name / Relationship	ISRAFILOV RUSTEM , FATHER
Any dependents / Children (incl age)	Not any
Address	3,2 Aliyev4, a. HUSEYNZADA str, YASAMAL district, BAKU, AZERBAIJAN
Contact Numbers	+994 55 872 26 10

Section 6 STCW95 Highest Certificate of Competency / Licence Held (also list Flag State Endorsements)					
Class / Grade/Capacity	Issuing Country	Certificate No.	Date Issued	Expiry	Details of Limitations
Officer in charge of an engine room which	Azerbaijan, Baku	000949/23	08.09.2023	08.09.2028	III/1

ALSO ENTER ABOVE DETAILS OF ANY OTHER FLAG STATE CERTIFICATES HELD

Section 7 STCW95 Dangerous Cargo Endorsements					
	Certificate No.	Date Issued	Expires	Details of Limitations/ Grade	
<u>Petroleum.....</u>					
<u>Liquefied Gas.....</u>					
<u>Liquid Chemicals.....</u>					

Section 8 STCW95 related Courses Attended and Certificates Obtained					
Name of Course / Certificate	STCW Code	Place	Issue Date	Cert No	Expiry Date
Mandatory minimum requirements for familiarization, basic safety training and instruction for all seafarers	A-VI/1-1, A-VI/1-2, A-VI/1-3, A-VI/1-4	Baku, Azerbaijan	16.06.2021	SO-1138-21	16.06.2026
Proficiency in survival craft and boats other than fast rescue boats	A-VI/2-1,2,3,4	Baku, Azerbaijan	11.06.2021	SL-0487-21	11.06.2026
International safety Management Code	SOLAS IX	Baku, Azerbaijan	09.06.2021	SP-0816-21	09.06.2026
Ship Security-related training and instructing	A-IV/6, 1-4	Baku, Azerbaijan	01.06.2021	SI-0471-21	19.05.2026
Training for seafarers with designated security duties	A-IV/6-2	Baku, Azerbaijan	21.05.2021	SH-0425-21	25.05.2021
Training in advanced Fire – fighting	A-VI/3	Baku, Azerbaijan	21.06.2021	SJ-0500-21	21.06.2026
Medical First Aid	A-VI/4 Pa. 1, 2, 3	Baku, Azerbaijan	10.06.2021	SN-0437-21	04.06.2026
Leadership and Teamwork	AII/1,2	Baku, AZERBAIJAN	15.06.2021	DL-0542-21	15.06.2026
Engine Resource Management	AIII-1, III-2, III-3	Baku, Azerbaijan	11.06.2021	ER-0229-21	11.06.2026

Section 9 OFFSHORE INDUSTRY COURSES					
Please enter below any other certificates held or courses done, ie offshore, DP certs etc or Any other not already mentioned					
Name of Course / Certificate	APPROVALS	Place	Issue Date	Cert No	Expiry
OFFSHORE MEDICALS (UK, NORWAY or NETHERLAND)	UNIKLINIKA	Baku, Azerbaijan	12.04.2023	N/A	12.04.2025
MARLIN's English Test					

IELTS-English TEST				SCORE	
				YES	NO
Have you ever signed off a ship due medical reason?					x
Have you undergone any medical operations in past?					x
Have you consulted a doctor during the past 12 months for an illness / Accident					x
Do you have any health or disability problem now?					x
If answer to any of above is YES then give further details below or on a separate sheet					
Section 10 General					
				Yes	No
Have you ever been the subject of a court of enquiry or involved in a maritime accident					x
Have you ever had a professional licence suspended or revoked					x
Have you ever been convicted of any criminal offence?					x
Have you ever been dismissed					x
If yes to any of above then please full details below or on separate sheet of paper					
Section 11 References (Last Two Recent Employers)					
Name of company					
Name Person to be contacted					
Address					
Tel No		Fax			
Email					
Name of company					
Name Person to be contacted					
Address					
Tel No		Fax			
Email					
Section 14 Any other information, you wish to add in support of your application					
Section 15 Declaration					
I hereby declare that the above particulars are true and I authorize you to contact the referees listed above And confirm that All my certificates / Licences are Authentic / SEASERVICE RECORD is ACCURATE / And I confirm accepting Companies DRUG & ALCOHOL Policy					

SEA EXPERIENCE (LAST 5 YEARS – MOST RECENT EXPERIENCE ON TOP LINE)

Vessel	Company	Type of vessel	Flag	DWT	GRT	BHP	Rank	Sign on	Sign off
VASILY TATISCHEV	CUNDA SHIPPING	GENERAL CARGO	PALAU	5009	3956	138 x 17 m	MOTORMAN	27.01.2022	26.03.2023