



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position	identity card PIN Number 32965253498
Position Applied for:	Able Seafarer Engine
Date Available from:	19.01.2024

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Personal Information		Gender: Male
First Name: OMER LUTFI	Last Name: DOGDU	
Date of Birth: 01.01.1968	Place of Birth (City and Country): Turkey, CHERKESH	
Email: Lutfidogdu@gmail.com	Mobile Number: (+90) 532 317 86 19	
Permanent Adress: Barbaros Hayrattin Pasha neighbourhood , street no 1 home 6c	Expected Salary Per Month: 2500\$	
Nationality: Turkish	Alternative rank applying for: Able Seafarer Engine	
Person to call in emergency: 053 968 973 77 Son		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Ali	Dogdu	Male	Son	05396897377

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
-	-	-	-	-

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Physical Data	
Height	160
Weight	74
Boilersuit Size	XXL
Shoes Size	40
Blood group	O+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

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Seaman`s Book & Identify Docs					
DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY
Seaman Book	Turkey	S0034119	28.09.2021	Turkey	28.09.2026

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

Republic of Turkey	Turkey	U13965701	15.02.2017	Turkey	15.02.2027
Certificate of Competency	Turkey	11706888	28.09.2021	Turkey	-
Do you hold a US Visa 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry Date: -
Do you hold a US Visa 'B1/B2'?	YES/NO	NO	Issue Date:	-	Expiry Date:-
Have you been rejected for any visa applied for?	YES/NO		NO		
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)	Turkey	Turkey City	28.09.2021
Flag State Endorsements	-	-	-

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STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	11706887	UAG	28.09.2021	28.09.2026
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	11706887	UAG	28.09.2021	28.09.2026
ELEMENTARY FIRST AID	Azerbaijan	11706887	UAG	28.09.2021	28.09.2026
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	11706887	UAG	28.09.2021	28.09.2026
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	11706887	UAG	28.09.2021	28.09.2026
Engine Room Watchkeeping Certificate	Azerbaijan	11706888	UAG	28.09.2021	28.09.2026
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	11706884	UAG	28.09.2021	28.09.2026
Security Awareness Training For All Seafarers	Azerbaijan	11706886	UAG	28.09.2021	28.09.2026
Security Training For Seafarers With Designated Security Duties	Azerbaijan	11706883	UAG	28.09.2021	28.09.2026
Personal Safety And Social Responsibility Training Certificate	Azerbaijan	11706890	UAG	28.09.2021	28.09.2026
Personal Survival Techniques Training Certificate	Azerbaijan	11706885	UAG	28.09.2021	28.09.2026
Advanced Training in Fire Fighting	Azerbaijan	11706891	UAG	28.09.2021	28.09.2026
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	11706890	UAG	28.09.2021	28.09.2026

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

[illegible]

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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
Vaccination		
Yellow Fever	YES/NO	NO
COVID-19	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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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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References *(Please give the name and address of your current or immediate past employer)*

Name of company	1.-	2.-
Name of person to contact	-	-
Address	-	-
☎ No.	-	-

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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.

Date: 15.01.2024

Signature

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