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APPLICATION FORM

1	Position	identity card PIN Number 5JMB5KA				
	Position Applied for:	Rating forming part of an engine-room watch				
	Date Available from:	01.03.2024				

Personal Information	Gender: Male
First Name: TURAL	Last Name: SEYIDOV
Date of Birth: 10.02.1993	Place of Birth (City and Country): Azerbaijan,KHACMAZ
Email: turalseyidov503@gmail.com	Mobile Number: (+994) 50 434 85 74
Permanent Adress: Khacmaz distric,	Expected Salary Per Month:
Armud Padar village	1200\$
Nationality: Azerbaijan	Alternative rank applying for:
	Rating forming part of an
	engine-room watch
Person to call in emergency: (+994) 50 59	

3	Family Details: (If Unmarried kindly give details of Father / Mother)							
	First Name	Last Name	Gender	Relation	Contact			
	Ayaz	Seyidov	Male	Brother	050 590 08 57			

Maritime Education							
Name of school	Country	From	То	Type of degree or diploma			
Azerbaijan Maritime College	Azerbaijan	2013	2014	Sub-bachelor			
VSWTU	Russia	2020	2023	Sub-bachelor			

Physical Data					
168					
70					
L					
42					
A(II)RH+					

6 Seaman's Book & Identify Docs

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

Tel: +994 51 277 19 31

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF	ISSUE	DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK	024177	20.06.2023	Azerbaijan		20.06.2028
Certificate of Competency	Azerbaijan	RPO	069927	31.05.2023	Azerbaijan		-
Republic of Azerbaijan	Azerbaijan	C03	931525	04.05.2022	Azerbaijan		03.05.2032
Republic of Panama	Panama	P03	342541	18.07.2018	Panama	City	18.06.2023
Do you hold a US Visa 'C1/D'?		YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	YES/NO	NO	Issue Date:	-	Expiry	Date:-	
Have you been reject	ed for any visa ap _l	YES/NO	NO				
If YES, please state the	he country and rea	isons		-			

Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8 Licences

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijan	ASMA, BAKU	31.05.2023
Flag State Endorsements	Panama	Panama City	18.06.2023

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STCW Certificates & Trainings								
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry			
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-4657-23	UAG	11.09.2023	11.09.2028			
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-4657-23	UAG	11.09.2023	11.09.2028			
ELEMENTARY FIRST AID	Azerbaijan	SO-4657-23	UAG	11.09.2023	11.09.2028			
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-4657-23	UAG	11.09.2023	11.09.2028			
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-4657-23	UAG	11.09.2023	11.09.2028			
International Safety Management	Azerbaijan	SP-3216-23	UAG	22.09.2023	22.09.2028			
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-3562-23	UAG	20.09.2023	20.09.2028			
Security Awareness Training For All Seafarers	Azerbaijan	SI-3001-23	UAG	15.09.2023	15.09.2028			
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-2621-23	UAG	25.09.2023	25.09.2028			

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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
Orsa Tanker	Aral	Malta	Tanker	1000 0	-	-	-	2.4	15.06.2015	0411.2015	5 month	End od Contract
GN Group	Lady Ayse	Panama	Dry Cargo	5489	Akasaks - Mitsubis hi	9978	7 2 C E	A.B	19.09.2018	0.03.2019	6 month	End of Contract
FHN	Svetlamor-2	Azerbaija	Tug	-//	Wartsila	1695	-	3.4	20.01.2022	31.05.2023	12 month	End of Contract
GN Group	Tagus River	Panama	Dry Cargo	4922	Wartsila	2841	-	A.B	20.05.2022	30.12.2022	7 month	Own will
							AP					
							M.					

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Generators						
Purifiers and Boilers	-					
Type of Cranes / No of Reefer Containers	-					
Other Experience						
-						
Travel Documents						
Name	YE	S/NO	Country	Date	pf Expire	
Schengen		YES/NO YES/NO	NO NO		-	
US China		YES/NO	NO			
Australia		YES/NO	NO		-	
Insurance,Health Related Docu	umentation					
Medical Certificate (Fit for Duty)				YES/NO	Y	
Yellow Fever		Vaccina	ition	YES/NO	1	
COVID-19				YES/NO	Y	
Medical history	due to medical rea	sons?		YES/NO	1	
Medical history Have you ever signed off a ship of	Have you undergone any operation in the past?					
Have you ever signed off a ship of Have you undergone any operation	ion in the past?			YES/NO		
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor dur	on in the past? ing the last 12 mor		ss/accident?	YES/NO		
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor durn Do you have any health or disable.	on in the past? ing the last 12 mor ility problems now?		ss/accident?	YES/NO YES/NO	ı	
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor durn Do you have any health or disab Do you take any medications reg	ion in the past? ing the last 12 mor ility problems now? jularly?			YES/NO YES/NO YES/NO	1	
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor durn Do you have any health or disable.	ion in the past? ing the last 12 mor ility problems now? jularly?			YES/NO YES/NO YES/NO	1 1	
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Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor durn Do you have any health or disab Do you take any medications regulation. (If the answer is YES to any o	ion in the past? ing the last 12 mor ility problems now? jularly? f the above, please	give full detail	s and attach a separate	YES/NO YES/NO YES/NO	()	
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor durn Do you have any health or disab Do you take any medications regulations (If the answer is YES to any o	ion in the past? ing the last 12 mor ility problems now? jularly? If the above, please of a court of enquin	give full detail	s and attach a separate	YES/NO YES/NO YES/NO page if necessary) NO	
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor durn Do you have any health or disab Do you take any medications regulated (If the answer is YES to any of General Have you ever been the subject of	ion in the past? ing the last 12 mor ility problems now? jularly? If the above, please of a court of enquing I license suspende	give full detail or involved in d or revoked?	s and attach a separate a maritime accident?	YES/NO YES/NO YES/NO page if necessary	no l	
Have you ever signed off a ship of Have you undergone any operation Have you consulted a doctor dure Do you have any health or disab Do you take any medications regardly (If the answer is YES to any of General Have you ever been the subject of Have you ever had a professional description of the subject of	ion in the past? ing the last 12 mor ility problems now? jularly? If the above, please of a court of enquing I license suspende	give full detail or involved in d or revoked?	s and attach a separate a maritime accident?	YES/NO YES/NO YES/NO page if necessary) NO	

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References (Please give the name and address of your current or immediate past employer)					
Name of company	1. Orsa Tanker	2			
Name of person to contact	Onder Kaptan	-			
Address	-	-			
☎ No.	+90 542 427 67 06	-			

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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:

23.01.2024

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