



## **APPLICATION FORM**

1	Position	identity card PIN Number 18CGYVT
	Position Applied for:	Rating forming part of an engine-room watch
	Date Available from:	23.01.2024

Personal Information	Gender: Male
First Name: ELMAR	Last Name: RZAYEV
Date of Birth: 30.07.1992	Place of Birth (City and Country): Azerbaijan, ASTARA
Email: elmarrzayev92@gmail.com	Mobile Number: (+994) 99 722 30 00
Permanent Adress: Astara district, Kakalos village	Expected Salary Per Month:
Nationality: Azerbaijan	Alternative rank applying for:
	Oiler

3	Family Details: (If Unmarried kindly give details of Father / Mother)						
	First Name	Last Name	Gender	Relation	Contact		
	Gunel	Rzayeva	Feamale	Wife	050 635 29 35		
	Ramiz	Rzayev	Male	Father	050 416 14 48		

Maritime Education				
Name of school	Country	From	То	Type of degree or diploma
Kaspian Edu Center MMC	Azerbaijan	09.2022	03.2023	Course

Physical Data	
Height	173
Weight	96
Boilersuit Size	XXXL
Shoes Size	43
Blood group	O(I)RH+
Additional Physical Information:{You can write any o	other information you want to add about your physique in this field.}

Seaman's Book & Id	entify Docs				
DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY

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Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair Sale & Purchasing Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

Seaman Book	Azerbaijan	DQK	023691	17.05.2023	Azerb	aijan	17.05.2028
Certificate of Competency	Azerbaijan	RP	12823	04.05.2023	Azerb	aijan	-
Republic of Azerbaijan	Azerbaijan	C029	998055	06.04.2023	Azerb	aijan	05.04.2033
Republic of Panama	Panama	P001	14380A	20.11.2023	Panam	a City	23.08.2028
Do you hold a US Visa	a 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Visa	a 'B1/B2'?	YES/NO	NO	Issue Date:	-	Expiry	Date:-
Have you been rejecte	ed for any visa app	lied for?		YES/NO	NO		
If YES, please state th	ne country and reas	sons		-			

**Professional Test** 

<b>Professional Test Date</b>	Name of Test	Score
-	-	-

Licences

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijan	ASMA, BAKU	04.05.2023
Flag State Endorsements	Panama	Panama City	23.08.2028

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STCW Certificates & Trainings					
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-0168-23	UAG	16.01.2023	11.01.2028
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0168-23	UAG	16.01.2023	11.01.2028
ELEMENTARY FIRST AID	Azerbaijan	SO-0168-23	UAG	16.01.2023	11.01.2028
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0168-23	UAG	16.01.2023	11.01.2028
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0168-23	UAG	16.01.2023	11.01.2028
International Safety Management	Azerbaijan	SP-0133-23	UAG	19.01.2023	18.01.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0142-23	UAG	16.01.2023	16.01.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-0092-23	UAG	17.01.2023	12.01.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0146-23	UAG	24.01.2023	24.01.2028

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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

## **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
GN GROUP	M/V WHARFE RIVER	Panama	Dry Cargo	3500	Diesel	2236	-	Oiler	21.08.2023	13.12.2023	4 month	Own Will
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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

Purifiers and Boilers	-				
Type of Cranes / No of Reefer Containers	-				
Other Experience					
_					
-					
Travel Documents					
Name		YES/NO	Country	Date pf	Expire
Schengen		YES/NO	NO	- Sate pi	
US		YES/NO	NO	-	
China		YES/NO	NO	-	
Australia		YES/NO	NO	-	
Insurance,Health Related	Documentation				
Medical Certificate (Fit for I	Duty)			YES/NO	YE
		Vaccina	ation		
Yellow Fever				YES/NO	NO
COVID-19				YES/NO	YE
e answer is YES to any of th					
Medical history		I reasons?		YES/NO	NO
Medical history  Have you ever signed off a	ship due to medica			YES/NO	NO
Have you ever signed off a	peration in the past	?		I LO/NO	
Have you ever signed off a Have you undergone any of Have you consulted a doctor	peration in the past or during the last 12	? months for an illne	ss/accident?	YES/NO	NO
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or	peration in the past or during the last 12 disability problems	? months for an illne	ss/accident?	YES/NO YES/NO	NO NO
Have you ever signed off a Have you undergone any of Have you consulted a doctor	peration in the past or during the last 12 disability problems	? months for an illne	ss/accident?	YES/NO	N(
Have you ever signed off a Have you undergone any of Have you consulted a doct Do you have any health or Do you take any medication	peration in the past or during the last 12 disability problems in ns regularly?	? months for an illne now?	ss/accident?	YES/NO YES/NO YES/NO	
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medication (If the answer is YES to	peration in the past or during the last 12 disability problems in ns regularly?	? months for an illne now?		YES/NO YES/NO YES/NO	NO NO
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medication (If the answer is YES to	operation in the past or during the last 12 disability problems in ns regularly? any of the above, pl	? months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO page if necessary)	NO NO
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medication (If the answer is YES to	operation in the past or during the last 12 disability problems in ns regularly? any of the above, pl	? months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO page if necessary)	NO NO
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medication (If the answer is YES to	operation in the past or during the last 12 disability problems in ns regularly? any of the above, pl	? months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO page if necessary)	No No
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medication (If the answer is YES to	operation in the past or during the last 12 disability problems in regularly?  any of the above, plusted bject of a court of ensistence in the second license suspension and the past of t	months for an illne now? ease give full detaination of the second of the	Is and attach a separate	YES/NO YES/NO YES/NO page if necessary)	NO NO
Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medication (If the answer is YES to  General  Have you ever been the sul Have you ever had a profes	operation in the past or during the last 12 disability problems in regularly?  any of the above, plusted bject of a court of ensistence in the second license suspension and the past of t	months for an illne now? ease give full detaination of the second of the	Is and attach a separate	YES/NO YES/NO YES/NO page if necessary)	No No

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Sale & Purchasing **Ship Agency** Exclusive Cargo Brokering Bunker Supply Technical Services 16 References (Please give the name and address of your current or immediate past employer)

Name of company	1. GN GROUP	2
Name of person to contact	-	-
Address	operation@gngroup	-
■ No.	+90 216 325 08 00	-

17	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:	22.01.2024	
Signature			

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