



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position		identity card PIN Number 14YDPB3
Position Applied for:	Master	
Date Available from:		

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Personal Information		Gender: Male
First Name: MAHMUD	Last Name: SHAHPALANGOV	
Date of Birth: 24.01.1961	Place of Birth (City and Country): Azerbaijan, DAVACHI	
Email: mahmudshahpelengov61@gmail.com	Mobile Number: (+994) 50 667 66 57	
Permanent Address: Baku city, Khojali pr, Home 24 A, m102	Expected Salary Per Month: 7000\$	
Nationality: Azerbaijan	Alternative rank applying for:	
Person to call in emergency: (+994) 51 403 77 03 Wife		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Yasaman	Shahpaangov	Female	Wife	051 403 77 03

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	1978	1982	Bachelor

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Physical Data	
Height	182
Weight	100
Boilersuit Size	XXL
Shoes Size	44
Blood group	AB(IV)RH-
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
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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

Address: AZ1075, Azerbaijan, Baku, Yusif Vazir Cemenzemenli 119c, Afen Plaza Business Center 5nd floor, apt 13

Email: crewing@unitedalliancegroup.com

Tel: +994 51 277 19 31

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 025806		18.11.2023	Azerbaijan		18.11.2028
Certificate of Competency	Azerbaijan	0000903		07.11.2023	Azerbaijan		27.09.2028
Republic of Azerbaijan	Azerbaijan	C01747980		08.12.2017	Azerbaijan		07.12.2028
Republic of Panama	Panama	PA0096663		13.09.2021	Panama City		16.03.2026
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)	Azerbaijan	ASMA,BAKU	27.09.2028
Flag State Endorsements	Panama	Panama City	16.03.2026

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STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-5326-23	UAG	20.11.2023	13.11.2028
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-5326-23	UAG	20.11.2023	13.11.2028
ELEMENTARY FIRST AID	Azerbaijan	SO-5326-23	UAG	20.11.2023	13.11.2028
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-5326-23	UAG	20.11.2023	13.11.2028
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-5326-23	UAG	20.11.2023	13.11.2028
International Safety Management	Azerbaijan	SP-3133-23	UAG	15.09.2023	08.09.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-4385-23	UAG	08.12.2023	08.12.2028
Dangerous ,hazardous and harmful cargoes	Azerbaijan	SK-0695-23	UAG	29.11.2023	29.11.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1513-19	UAG	03.12.2019	03.12.2024
Ship Security Officer	Azerbaijan	SG-0315-23	UAG	15.09.2023	16.08.2028
Leadership & Teamwork	Azerbaijan	DL-0789-23	UAG	18.09.2023	31.08.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-1378-23	UAG	07.11.2023	02.11.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0087-20	UAG	26.02.2020	26.02.2025
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	SB-0053-20	UAG	04.03.2020	04.03.2025
Updating	Azerbaijan	XS-0560-23	UAG	02.10.2023	27.09.2028
Medical First Aid	Azerbaijan	SN-1574-23	UAG	20.10.2023	17.10.2028
Medical Care	Azerbaijan	SM-0453-23	UAG	16.10.2023	16.10.2028
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0071-21	UAG	16.03.2021	16.03.2026
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SQ-0380-23	UAG	08.09.2023	18.08.2028
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0423-19	UAG	11.12.2019	11.12.2024
Bridge Resource Management	Azerbaijan	SW-0468-23	UAG	30.10.2023	26.10.2028
Ship Handling and Maneuvering	Azerbaijan	SV-0365-23	UAG	20.11.2023	17.11.2028
Proficiency in Fast Rescue Boats	Azerbaijan	SU-0035-19	UAG	14.02.2019	14.02.2024

Basic Training For Liquefied Gas Tanker Cargo Operations	Panama	CTC-ALTGT-32-028	CTS	11.02.2022	20.12.2026
Basic Training For Liquefied Gas Tanker Cargo Operations	Panama	CTC-LGT-29-038	CTS	11.02.2022	12.12.2026

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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)

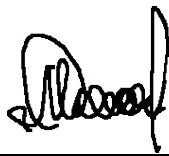
Name of company	1.-	2.-
Name of person to contact	-	-
Address	-	-
☎ No.	-	-

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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.



Signature

Date: 26.01.2024

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