APPLICATION FORM

Position

Position applied for: **ABLE SEAMAN** Are you willing to accept any other positions? YES

If YES, which positions would you consider? AΒ From what date will you be available? **ASAP**

Nearest airport: Batumi Airport, Trabzon Airport, Kutaisi Airport, Tbilisi Airport

ANY TYPE Preferred Ship Type

Personal details

Name: (Last Name	ADZE	(First Name	s) C	ODERE	DZI	
Date/place of birth:	14/06/199	90	Na	ationality	GEOR	GIAN
Permanent address:	GEOREG	IA/BENZE ,TAMARIS I	DASAKHLEBA,	,TSOTNE	DADIAN	IS 9A.22
	Skype			☎ No.:	(home)	+995558050559
	e-mail :	Malvina_bedinadze@	mail.ru	☎ No.:	(mobil)	
	Viber +995558050559					
	11001	+9955580505559				

3 **Education Background**

School / College From То **Highest Qualification Attained** Batumi Navigational institute-2006 2009 AB I CLASS SEAMAN

Identity documents

DOCUMENT	COUNTRY		NUMBER		ISSUED	PLACE	EXPIRY
Int'nal Passport:	GEORGIA	20A	C21993	3	03.12.2021	GEORGIA	03.12.2031
Seaman book:	GEORGIA	GEO	16530		25.03.2019	GEORGIA	25.03.2024
Seaman book:	DUTCH						
	Liberian						
	Panamanian						
	Other						
Do you hold a US Visa 'C1' / 'D ?				NO			
Do you hold a US Visa 'B1' / 'B2 ?				NO			
Do you hold a Schengen Visa ?			YES		N/A GEORGIAN		VIZA FREE

Family details

NEXT OF R	KIN Relationsh	nip: WIFE
Name:	(Last Name) BEDINADZE (First Name)	mes) MALVINA
Address:	GEOREGIA/BENZE ,TAMARIS DASAKHLEBA,TSOT	NE DADIANIS 9A.22
		Post code: 6000

Contact telephone numbers: 1st. 2nd. +995555376571

Malvina bedinadze@mail.ru

Names of Children Sex Date of Birth

Highest Certificates of Competency held 6

Class / Grade	Issuing Country	Certificate No.	Date Issued	Place Issued	Valid Until
II/5	GEORGIA	MTA-00-013466	23.06.2021	BATUMI	14.06.2026
Endorsement	Issuing Country	Certificate No.	Date Issued	Place Issued	Valid Until
AB 1 CLASS	GEORGIA	2230/01	24.07.2009	BATUMI	

OPERATION Revision Annex APPLICATION FORM Page 1 of 5 1

6a Dangerous Cargo Endorsements

	Certificate No.	Date Issued	Place Issued	Valid Until
Petroleum				
Liquefied Gas				
Liquid Chemicals				

Highest Certificates Of Competency issued by other countries (Issued by countries other than in Section 6)

Class	Issuing Country	Certificate No.	Date Issued	Place Issued	Valid Until
	Liberia				
	Panama				
	DUTCH				

7a Dangerous Cargo Endorsements (Issued by countries other than in Section 6a)

Country/Type	Certificate No.	Date Issued	Place Issued	Valid Until

Course	s attended and certificates obtair	ned				
Model	Course	Institution	Place	Date	Cert. No.	Valid Until
	BASIC STCW	MTA				
1.1	Personal Survival	MTA	Georgia	23.06.2021	BST02-142171	08.06.26
1.2	Medical & First Aid	MTA	Georgia	23.06.2021	BST02-142171	08.06.26
1.3	Basic Fire Fighting	MTA	Georgia	23.06.2021	BST02-142171	08.06.26
1.4	Personal Safety	MTA	Georgia	23.06.2021	BST02-142171	08.06.26
	SPECIAL STCW					
2.1	Proficiency In Survival Craft	MTA	Georgia	14.06.2021	FRB02-142171	08.06.26
2.2	Fast Rescue Boats	MTA	Georgia	14.06.2021	FRB02-142171	08.06.26
2.3	Advance Fire Fighting		_			
2.4	Medical First Aid					
2.5	Medical Care					
	ADD. CERT.					
	ARPA / Radar Observer					
	GMDSS					
	GMDSS Endorsement					
	ECDIS					
5.1	Tanker Familiarization	MTA	Georgia	08.08.2022	OCG02-167379	07.08.27
5.2	Oil Tanker Advanced	MTA	Georgia	08.08.2022	OCG02-167379	07.08.27
5.3	Chem. Tanker Advanced	MTA	Georgia	08.08.2022	OCG02-167379	07.08.27
5.4	Gas Tanker Advanced					
	COW					
	Inert Gas					
7	HAZMAT (Dangerous Cargoes)	MTA	Georgia	23.06.2021	CDH02-142173	21/05/26
	Security Awareness Training	MTA	Georgia	26.02.2019	SEC03-105036	17/02/24
	Security Training for Seafarers	MTA	Georgia	26.02.2019	SEC03-105036	17/02/24
	Electrical & electronic					
	equipment					
	Shipp Handling Arrangements					
	Bridge Resources Management					
	Ship Handling Stimulator					
	ISM Code					
	Liq. Cargo Handling Stimulator					
	Ship Security Officer (SSO)					
	YELLOW FEVER		Georgia	29.12.2009		UNLM
	DPO SERT					

Record of previous service

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

VESSEL	COMPANY#	VESSEL	FLAG	DWT	YEAR	MAI	N ENGINE	B.H.P.	RANK	SIGN ON	SIGN OFF
		TYPE / DP CLASS			BUILT	MAKE	TYPE			DATE dd.mm.yy	DATE dd.mm.yy
M/V ERENC		GENERAL CARGO	TURKEY	10632	2004	N/A	N/A	6337GRT 2500KW	A/B	20/07/2010	28/01/2011
MV OBAHAN C		BULK CURRIER	PANAMA	34467	2015	N/A	N/A	21525 GRT	A/B	22/03/2011	20/01/2012
M/V CEM PIONEER		GENERAL CARGO	St Vincent Grenadines	8750	1983	N/A	N/A	5934GRT	A/B	20/03/2012	20/08/2012
M/V DOGAN BEY		BULK CURRIER	TURKEY	12260	2003	N/A	N/A	7265GRT 3603KW	A/B	22/10/2012	14/07/2013
M/V DOGAN BEY		BULK CURRIER	TURKEY	12260	2003	N/A	N/A	7265GRT 3603KW	A/B	17/01/2014	20/11/2014
M/V DOGAN BEY		BULK CURRIER	TURKEY	12260	2003	N/A	N/A	7265GRT 3603KW	A/B	06/04/2016	28/12/2016
M/V SIGMA		GENERAL CARGO	TURKEY	10131	2005	N/A	N/A	6337GRT 2500KW	A/B	12.07.2021	18.10.2021
M/V BARLA B		GENERAL CARGO	PANAMA	6105	2007	N/A	N/A	4243GRT 1912KW	A/B	21/08/2022	25/07/2021
M/V HAZAR S		GENERAL CARGO	BARBADOS	6616	2009	N/A	N/A	4425GRT 2500KW	A/B	17/02/2022	24/06/2022

OPERATION	Annex	APPLICATION FORM	Revision	Page 3 of 5
PROCEDURE OP-01	1		0	· ·

M/T ORION	FINBAR NAVIGATION	OIL TANKER	CAMEROON	125772	1997	N/A	N/A	2X10010K W	A/B	19/08/2022	25/09/2022
	CORP										

REMARKS:

1. Multicrew experience: MIX

2. English level –GOOD

3. Reference :GOOD

4. Salary expected: 1400 USD

5. Duration of employment expected: 6+/-1

6. Size shoes __43__ Size boiler suit __LARGE__ Weight __75 kg__ Height: _176 cm__

10	Medical history								
	Have you ever signed off a ship due to medical reasons?	NO							
	Have you undergone any operation in the past?	NO							
	Have you consulted a doctor during the last 12 months for an illness/accident?	NO							
	Do you have any health or disability problems now?	NO							
	Do you have any health or disability problems now?								
	(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)								
11	General								
	Have you ever been the subject of a court of inquiry or involved in a maritime accident?	NO							
	Have you ever had a professional license suspended or revoked?	NO							
	(If YES, please give full details and attach a separate page if necessary)								
12	References (Please give the name and address of your current or immediate past employer)								
12									
	Name of company								
	Name of person to contact								
	Address								
	₹ No.								
12a	References (Please list two contactable referees or past employers in addition to Section 11)								
	Name of company								
	Name of person to contact								
	Address								
	7 (44) 555								
	☎ No.								
13	Automatic review								
	If immediate employment is not available do you wish to be considered for future vacancies?	Yes							
	If YES, please give any alternative contact details not shown in Section 2								
	.0055505050	_							
	+995558050559								
14	Declaration								
		ad above							
	I hereby declare that the above particulars are true and authorize you to contact the referees list	eu above.							
	Date: 00.04.0004								
	Date: Date:								
	Olynature								

OPERATION Annex APPLICATION FORM Revision Page 5 of 5
PROCEDURE **OP-01 1 0**