

## **APPLICATION FORM**

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•	Pe	erson	al ID	Numl	ber		•

							Date Available from:			
1. Personal Data										
Family Name: VELIYEV	V	Firs	st Nar	ne: NIHAI	)	Middle Name: HABIL				
Date of Birth: 06.01.1997	7	Place	e of Birth (City and Country  Citizenship: AZERBAIJAN.			N				
Date of Birth. 00.01.1777			Position Applied for;			Ciuzensinp. AZERDAIJAN.				
Permanent Address 20th area, Sabail district,						` '	): +994 55 313 <sup>4</sup> 4 55 797 72 70	72 10		
2. Maritime Education										
Name of school		Country		Town	From		То	Type of degree	AN. 13 72 10 70 gree or diploma BAKALAVR	
Azerbaijan State Marine Acad	demy	AZERBAI.	JAN	BAKU	2012	20	016	SUBBA	KALAVR	
3. Professional Test										
English Test Date 10.08.2017			Name	of Test İNTI	ERCHANG	GE	Score 66			
Professional Test Date			Name	e of Test			Score			
Professional Interview Date.	NO		Resul	t.						
4. Family Details										
Civil Status(Single, Mar.	ried, Se	eparated, l	Divor	ced, Widov	ved) : SI	NGI	LE			
Next of Kin (the first em	nergenc	y contact	) NO				Relation	nship NO		
Address of Residence							Phone :-	+99450774498	39	
Daughter				Son			D	aughter	Son	
Family Name										
First Name										
Date of Birth										
City of living										
Phone Numbers	Phone Numbers									

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Page 1 of 35. Identity Documents									
Document	Country	Number	Plac	Issue Date	Expiry Date				
Seaman's Book	AZERBAIJAN	DQK022614	Caspian	01.02.2023	01.02.2028				
Travel Passport	AZERBAIJAN	C03081422	MİNSTRYOFİNT	MİNSTRYOFİNTERNAL AFFAİR		26.08.2030			
Civil Passport	AZERBAIJAN	AA4619829							
6. Valid Visa N	0	,	'			'			
Country or Unio	on	Тур	oe e	Valid Until					

7. Courses Attended and Certificates Obtained								
Document	Number	Da	tes	Place				
Document		Issue	Expiry					
CERTIFICATE OF COMPETENCY	001386/23	25.12.2023	29.07.2026	AZERBAIJAN				
Second engineering officer of ships powered by main								
propulsion machinery of 3000 kW propulsion power								
or more								
MEDICAL FIRST AID	SN-0772-21	28.10.2021	28.10.2026	AZERBAIJAN				
( STCW-78,A-	SO-0099-23	13.01.2023	16.12.2027	AZERBAIJAN				
VI/pa.1,pa.2.1.1,pa.2.1.2,pa.2.1.3,pa.2.1.4								
(IMOModel Courses 1.13,1.19,1.20,1.21								
TRAINING FOR SEAFARERS WITH	SH-0070-23	13.01.2023	27.12.2027	AZERBAIJAN				
DESIGNATED SECURITI DUTIES.								
PROFICIENCY IN SURVIVAL CRAFT	SL-0049-23	09.01.2023	22.12.2027	AZERBAIJAN				
ANDBOATS OTHER THAN FAST RESCUE								
BOATS								
TRAINING IN ADVANCED FIRE-FIGHTING	SJ-0911-21	21.10.2021	21.10.2026	AZERBAIJAN				
SHIP SECURİTY-RELATED	SI-0064-23	10.01.2023	26.12.2027	AZERBAIJAN				
FAMİLİARİZATİON SECURİTY AWARENESS T								
ENGINE RESOURCE MANAGEMNT	ER-0419-21	13.10.2021	13.10.2026	AZERBAIJAN				
LİDERSHİP AND TEAMWORK	DL-1029-21	11.10.2021	07.10.2026	AZERBAIJAN				
SAFE OPERATION AND MAINTENANCE OF	DM-0309-23	15.12.2023	15.12.2028	AZERBAIJAN				
HIGH VOLTAGE SYSTEMS 1000 VOLTS OR								
MORE								
INTERNATIONAL SAFETY MANAGEMENT	SP-0621-20	26.08.2020	26.08.2025	AZERBAIJAN				

8. Physical Data							
Height			) CM				
Weight		80					
Colour of Hair			ACK				
Colour of Eyes		OWN					
Boilersuit Size	M						
Shoes Size		43					
9. Medical History					Yes	s No	
Have you ever signed off a ship du	ie to me	edica	al reasons?			NO	
Did you undergo any medical oper						NO	
Have you consulted a doctor durin	?	NO					
Do you have any health or disabili	ty probl	lems	now?			NO	
If yes, please give full details:					1		
			ssed:		Valid till:		
International Medical Examination		18.0	02.2023		18.02.2025	, ,	
Vaccination Against Yellow Fiver							
Vaccination Against Diphtheria							
10. References (please give name and addr				Office	e remarks		
Name of Company	SiO SHIF						
Name of person to contact	+994 50						
Address	Baku Az	zerba	aijan				
Name of Company							
Name of person to contact							
Address							
Name of Company							
Name of person to contact							
Address							
Address				l l			
Beneficiary							
Account No.							
Name of Bank							
Bank Address							
12. Knowledge and experience					Yes	No	
OCIMF vetting experience:						2.0	
ISGOT knowledge:							
	ve. inch	ııdir	ng Medical Histor	v. is true			
13. I hereby declare that the above, including Medical History, is true  The State Maritime Agency Date .18.02.2023 Signature							
Jule 110.02.2023 Signature							
14. For Office use only	1			<u> </u>			
V							

## 15. Seagoing Experience

C. PREVIOUS SEA SERVICE								
VESSEL	FLAG	TYPE / DWT	ENG / HP	RANK	S/ON	S/OFF	OWNERS	
M/V TROYA	PANAMA	3500	1384KW	OILER	12.01.2019	29.08.2019	FLAMA SHIPPING	
MV INANDI	PANAMA	3500	1384KW	OILER	17.09.2019	25.07.2020	IND SHIPPING	
MV FRI ST	BAHAMAS	2800	765KW	OILER	07.10.2020	11.09.2021	KAMER MARINE	
GAS MILANO	MARSHAL ISLANDS	4500	2800KW	3 RD ENGINEE R	21.05.2022	25.12.2022	GUNASH PETROL	
MV SARA	PALAU	8949	3841KW	3 RD ENGINEE R	24.02.2023	31.08.2023	SIO SHIPPING	

## Total rank sea service: Total type of vessel sea service:

Rank	Years	Type of vessel	
		OIL TANKER	
		LPG	YES
2 RD ENGINEER	2023	DRY CARGO	YES
		TANKER ICE	
		OIL /CHEMICAL TANKER	
		FERRY	
Total	4 YEARS		