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APPLICATION FORM

1	Position	identity card PIN Number 1AWFG0J		
	Position Applied for:	Electro -Technical Officer		
	Date Available from:	16.02.2024		

Family Details: (If Unmarried kindly give details of Father / Mother) 3 Gender Relation First Name **Last Name** Contact Wife Sharafat Bayramova Female Elnur Bayramzada Male Son 070 527 37 73

Maritime Education

Name of school

Azerbaijan State
Marine Academy

Marine Academy

Marine Education

To Type of degree or diploma

1987

1991

Bachelor

Height

Height

165

Weight

Boilersuit Size

Shoes Size

Blood group

Additional Physical Information:{You can write any other information you want to add about your physique in this field.}

| Seaman's Book & Identify Docs | DATE OF ISSUE | DATE 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	paijan DQK 025185		26.09.2023	Azerba	ijan	26.09.2028
Certificate of Competency	Azerbaijan	0000965		15.04.2022	Azerba	ijan	25.02.2027
Republic of Azerbaijan	Azerbaijan	C036	083393	11.01.2020 Azerbai		Azerbaijan 10.01.	
Do you hold a US Vis	Do you hold a US Visa 'C1/D'?		NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	YES/NO	NO	Issue Date:	- Expiry Da		Date:-	
Have you been reject	YES/NO	NO					
If YES, please state the	-						

7 **Professional Test**

Professional Test Date	Name of Test	Score
-	-	-

Licences

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

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STCW Certificates & Trainings							
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry		
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027		
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0497-22		10.02.2022	04.02.2027		
ELEMENTARY FIRST AID	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027		
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027		
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027		
International Safety Management	Azerbaijan	SP-3704-23	UAG	27.11.2023	22.11.2028		
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0844-22	UAG	13.04.2022	07.04.2027		
Security Awareness Training For All Seafarers	Azerbaijan	SI-0013-24	UAG	08.01.2024	08.01.2029		
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1295-19	UAG	02.10.2019	02.10.2024		
Crowd management training	Azerbaijan	SC-0190-23	UAG	17.08.2023	17.08.2028		
Leadership & Teamwork	Azerbaijan	DL-1168-21	UAG	17.11.2021	17.11.2026		
Advanced Training in Fire Fighting	Azerbaijan	SJ-0239-22	UAG	25.02.2022	25.02.2027		
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0887-23	UAG	31.10.2023	20.10.2028		
Updating	Azerbaijan	XS-0313-22	UAG	25.02.2022	25.02.2027		
1000v	Azerbaijan	DM-0003-24	UAG	19.01.2024	19.01.2029		
Medical First Aid	Azerbaijan	SN-0153-22	UAG	14.02.2022	14.02.2027		

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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
ASCO	G.ABBASOV	Azerbaijan	Tanker	3343	-	21497	-	ETO	1991	2004	-	End of Contract
ASCO	H.JABID	Azerbaijan	Dry Cargo	3500	-	6090	76	ETO	2004	2006	-	End of Contract
ASCO	I.HUSEYINO V	Azerbaijan	Pipe Line	1700 0	Wartsila	NA	O-P	ETO	2011	2017	-	End of Contract
ASCO	ABASOV	Azerbaijan	Crane	/ - A	Wartsila	-	-	ETO	2017	2022	-	End of Contract
ASCO	M.MOGAMAE V	Azerbaijan	Passenge r	1500	Jet		-	ETO	09.2022	12.2023	-	End of Contract
			A									
			10									
							Cultur					
								/				

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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		-
US		YES/NO	NO		-
China		YES/NO	NO		-
Australia		YES/NO	NO		-
Insurance,Health Related	Documentation				
Medical Certificate (Fit for I				YES/NO	YE
·		Vaccina	ation		<u> </u>
Yellow Fever				YES/NO	N
COVID-19				YES/NO	YE
Medical history					
Have you ever signed off a	•			YES/NO	
Have you ever signed off a Have you undergone any o	peration in the past?	?		YES/NO	NO NO
Have you ever signed off a Have you undergone any o Have you consulted a doctor	peration in the past? or during the last 12	? months for an illne	ess/accident?	YES/NO YES/NO	NO NO
Have you ever signed off a Have you undergone any o Have you consulted a docto Do you have any health or	peration in the past? or during the last 12 disability problems r	? months for an illne	ess/accident?	YES/NO YES/NO YES/NO	No No
Have you ever signed off a Have you undergone any o Have you consulted a doctor	peration in the past? or during the last 12 disability problems r ns regularly?	? months for an illne now?		YES/NO YES/NO YES/NO YES/NO	No No No
Have you ever signed off a Have you undergone any o Have you consulted a docto Do you have any health or Do you take any medication	peration in the past? or during the last 12 disability problems r ns regularly?	? months for an illne now?		YES/NO YES/NO YES/NO YES/NO	No No No
Have you ever signed off a Have you undergone any o Have you consulted a docte 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 r ns regularly? any of the above, plo	? months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	No No No No Y)
Have you ever signed off a Have you undergone any o Have you consulted a docto Do you have any health or Do you take any medication (If the answer is YES to General Have you ever been the sub	peration in the past? or during the last 12 disability problems r ns regularly? any of the above, place oject of a court of en	months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	N N N N N N N N N N N N N N N N N N N
Have you ever signed off a Have you undergone any o Have you consulted a docte 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 r ns regularly? any of the above, place oject of a court of en	months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	N N N N N N N N N N N N N N N N N N N
Have you ever signed off a Have you undergone any o Have you consulted a docto Do you have any health or Do you take any medication (If the answer is YES to General Have you ever been the sub	peration in the past? or during the last 12 disability problems r ns regularly? any of the above, pla oject of a court of ensional license suspe	months for an illne now? ease give full detain quiry or involved in ended or revoked?	Is and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	N N N N N N N N N N N N N N N N N N N
Have you ever signed off a Have you undergone any o Have you consulted a docto Do you have any health or Do you take any medication (If the answer is YES to General Have you ever been the sub Have you ever had a profes	peration in the past? or during the last 12 disability problems r ns regularly? any of the above, pla oject of a court of ensional license suspe	months for an illne now? ease give full detain quiry or involved in ended or revoked?	Is and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	N N N N N N N N N N N N N N N N N N N

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

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.

06.02.2024 Date:

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