## **APPLICATION FORM**



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Personal ID Number											

Position Applied for	r:Able Seaman(III/6)	Date Available from:ANY TIME							
1. D									
1. PersonalData									
Family Name: Orxan Abuze									
rov	First Name: Orxan	Middle Name: Ali							
	Place of Birth: Azerbaijan								
Date of Birth: 14.07.1996	/Shaki	Citizenship: Azerbaijani							
		T and J.							
		Phone (Home): 055-370-13-20							
Permanent Address	: Azerbaijan/Shaki	Whatshapp +99455-370-13-20							
	<b>-</b>	E-mail: abuzerli17@gmail.com							

2. MaritimeEducation					
Nameofschool	Town	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Baku	Azerbaijan	2013	2022	Bachelor

3. ProfessionalTest								
EnglishTest Date	Nameof Test	Score						
Professional TestDate	Nameof Test	Score						
Professional Interview Date		Result						

4. FamilyDetails	
Civil Status (Single, Married, Separated, Divorced, Widowed):	Single
Next of Kin (the first emergency contact):	Relationship /Father
Address of Residence: Azerbaijan/Sumgait	(050) 338-20-57

5. IdentityDocuments										
Document	Country	Number	PlaceofIssue	IssueDate	ExpiryDate					
Seaman'sBook Azerbaijan DQ		DQK 021841	State Maritime Adminstratio n	04.11.22	04.11.27					
TravelPassport	Azerbaijan	C01008948	Ministry of Internal Affairs	04.06.2016	03.06.2026					

6. ValidVisa							
CountryorUnion	Type	ValidUntil					

7. Courses Attended and Certificates Obtained							
Document	Number	Date	Place				
Document	Number	Issue Expiry		Tiacc			
CertificateofCompetency	RP-11904	14.10.2022	14.10.2032	State Maritime Administration			
MalteseEndorsementof COC							
OilTankerEndorsement							
ChemicalTankerEndorsement							
GasTankerEndorsement							
OilTankerFamiliarizationTraining							
ChemicalTankerFamiliarizationTraining							
GasTankerFamiliarizationTraining							
OilTankersSpecializedTraining							
ChemicalTankerSpecializedTraining							
GasTankerSpecializedTraining							
BasicTrainings	SO-3950-22	31.08.2022	30.08.2027	State Maritime Administration			
Proficiency in Survival Craft and Rescue Boats	SL-2531-22	29.08.2022	29.08.2027	State Maritime Administration			
AdvancedFireFighting							
MedicalFirstAidTraining							
Medical First Aid Training and Medical Care							
GMDSS							
GMDSS Endorsement							
RadarObservation&Plotting							
Automatic Radar Plotting Aids Simulator (ARPA)							
BridgeTeamManagement							
Shiphandling&Maneuvering							
Ship Security-related familiarization security-awarene	GT 400 < 44	22.00.2022					
ss training	SI-2006-22	23.08.2022	23.08.2022	State Maritime Administration			
MalteseEndorsementof SSO							
ISM Code	SP-2592-22	31.08.2022	31.08.2027	State Maritime Administration			
SafetyOfficer							
ECDISTrainingCourse							
RiskAssessmentCourse							
C.O.W./ I.G.S							
FirePracticeonTankers							
VapourRecoverySystem							
UnmannedMachinerySpace							
FRAMO FamiliarizationCourse							
Cargo Ballast Operations on Oil/Chemical Tankers							
Hazardous Materials							
Welder							
Turner							
Risk Management And Incident Investigation							
Training of seafarers with designated security duties							
Dangerous hazardous and harmfull cargoes	SH-1732-22	02.09.2022	02.09.2027	State Maritime Administration			
BasicTraining and qualifications on oil and chemical			,,				
tanker cargo operations							
Crowd management training							

8. PhysicalData						
Height		167 sm				
Weight		60				
ColourofHair		Black				
		Brown				
ColourofEyes BoilersuitSize		M				
ShoesSize		43				
Shoessize		43				
9. MedicalHistory				Yes	No	
Have you ever signed off a ship due t	o med	lical reasons?				
Did you undergo any medical operati						
Have you consulted a doctor during t		*	cident?			
Do you have any health or disability						
Do you have any nearth of thousanty	proore			I		
If yes, please give full details:						
		Passed:			Validtill:	
International Medical Examination		22.08.22		22.08.24		
		22.08.22			22.06.24	
Vaccination Against YellowFiver						
Vaccination Against Diphtheria						
10. References (please give name and address	of your c	urrent or past employer)	Officer	emarks		
Total Care Species give name and address	or your c	arrent or past employer)	o i i i co			
NameofCompany						
Name of person to contact						
Address						
Phone						
1			1			
NameofCompany						
Name of person to contact						
Address						
Phone						
			•			
11. Bank address forallotments						
Beneficiary						
AccountNo.						
NameofBank						
BankAddress						
12. Knowledgeandexperience			Y	es	No	
OCIMF vetting experience:					.,,,	
ISGOT knowledge:						
22 C C I MICHIEUGO.			<u> </u>			
13. I hereby declare that the above	, inclu	ding Medical History. is tr	ue			
Place	, 3-4-	<i>G</i>				

14. ForOfficeuseonly

## 15. SeagoingExperience

Nameofvessel	Flag	Vessel's Type	DWT	EngType	HP	Manageror Owner	Rank	From d/m/y	Tod/m/y	Total m/d
Nizami	Azerb daijan	Drei cargo	3950	Diesel		Azerbaijan Caspian Shipping Closed Joint-Stock Company	practitioner	18.06.2014	28.09.2014	3 m, 10 d.
Aura	Azerbaijan	Offshore	1393	Diesel		Azerbaijan Caspian Shipping Closed Joint Company	practitioner	01.06.2015	28.09.2015	3 m, 28 d.
Şirvan	Azerbaijan	Crane	11159	Diesel		Azerbaijan Caspian Shipping Closed Joint Company	practitioner	01.06.2016	21.09.2016	3 m,. 20 d
Merkuri-1	Azerbaijan	Passenger ship	19813	Diesel		Azerbaijan Caspian Shipping Closed Joint Company	practitioner	19.01.2017	22.02.2017	1m, 2d
Nikolay Meshkov	Comoros	General cargo	4918	Diesel		CUNDA DENIZCILIK LTD. STI.	Elektrician	01.06.2023	03.12.2023	6m. 3d

Total rank sea service:

**Total type of vessel sea service:** 

Rank	Years	Typeofvessel	Years
Able seaman		OIL TANKER	
		LPG	
		DRY CARGO	
		TANKER ICE	
		OIL /CHEMICAL TANKER	
		FERRY	
Total		Total:	