

**UNITED ALLIANCE GROUP LTD****AZERBAIJAN BRANCH**

APPLICATION FORM

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Position	identity card PIN Number 5Z6XDB0
Position Applied for:	Officer in charge of a Navigational Watch
Date Available from:	-

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Personal Information		Gender: Male
First Name: KANAN	Last Name: GOJA	
Date of Birth: 16.09.1995	Place of Birth (City and Country): Azerbaijan , BAKU	
Email: kenan.young95@gmail.com	Mobile Number: (+994) 50 851 71 33	
Permanent Address: 55/160-A Elshan Suleymanov street, Nizami district , Baku	Expected Salary Per Month: -	
Nationality: Azerbaijanian	Alternative rank applying for: 3 RD Officer	
Person to call in emergency: (+994) 51 620 44 52 Brother		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Ilkin	Gojayev	Male	Brother	+994516204452

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	2012	2016	Bachelor

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Physical Data	
Height	182
Weight	78
Boilersuit Size	M
Shoes Size	42
Blood group	A(II)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					
DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY

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 Chemenzemenli 119c,Afen Plaza Business Center 5nd floor,apt 13 **Email:** crewing@unitedalliancegroup.com **Tel:** +994 51 277 19 31

Seaman Book	Azerbaijan	DQK 022732		16.02.2023	Azerbaijan		16.02.2028
Certificate of Competency	Azerbaijan	0007920		10.08.2023	Azerbaijan		14.09.2028
Republic of Azerbaijan	Azerbaijan	C00363319		05.07.2014	Azerbaijan		04.07.2024
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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License

Name	Issuing Country	Certificate Number	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 TECHNIQS	Azerbaijan	SO-5610-22	ASMA	22.11.2022	21.11.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-5610-22	ASMA	22.11.2022	21.11.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-5610-22	ASMA	22.11.2022	21.11.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-5610-22	ASMA	22.11.2022	21.11.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-5610-22	ASMA	22.11.2022	21.11.2027
International Safety Management	Azerbaijan	SP-1254-22	ASMA	12.05.2022	28.04.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-3393-22	ASMA	20.10.2022	19.10.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-1264-21	ASMA	29.10.2021	22.10.2026
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-2047-22	ASMA	07.10.2022	06.10.2027
Ship Security Officer	Azerbaijan		ASMA		
Leadership & Teamwork	Azerbaijan	DL-1656-22	ASMA	25.10.2022	25.10.2027
Advanced Training in Fire Fighting	Azerbaijan	SJ-0830-23	ASMA	23.06.2023	23.06.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0268-22	ASMA	11.05.2022	22.04.2027
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	SB-0292-23	ASMA	22.09.2023	22.09.2028
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan		ASMA		
Medical First Aid	Azerbaijan	SN-0285-22	ASMA	31.03.2022	18.03.2027
Crowd management training	Azerbaijan	SC-0228-21	ASMA	20.10.2021	15.10.2026
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0310-22	ASMA	17.05.2022	17.05.2027
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SQ-0658-22	ASMA	30.12.2022	30.12.2027
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0201-22	ASMA	07.04.2022	01.04.2027
Bridge Resource Management	Azerbaijan	SW-0114-22	ASMA	14.03.2022	10.03.2027
Ship Handling and Maneuvering	Azerbaijan		ASMA		
Dangerous , hazardous and harmful cargoes	Azerbaijan	SK-0441-21	ASMA	29.10.2021	21.10.2026

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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
ZAMIL OFFSHORE SERVICES CO	M/V ZAMIL 401	Saudi Arabia	Repair vessel	985	-	1241	-	A/B	04.2018	08.2018	-	End of Contract
ZAMIL OFFSHORE SERVICES CO	M/V ZAMIL 401	Saudi Arabia	Repair vessel	985	-	1241	-	A/B	10.2018	03.2019	-	End of Contract
ASCO	M/V MAHMUD RAHIMOV	Azerbaijan	General Cargo	4485	-	4110	-	A/B	11.2021	02.2022	-	End of Contract
ASCO	M/V ORDUBAD	Azerbaijan	Passenger /Ro-Ro	3950	-	11450	-	A/B	05.2022	09.2022	-	End of Contract
ASCO	M/V ZARIFA ALIYEVA	Azerbaijan	Passenger /Ro-Ro	5878	-	8523	-	A/B	02.2023	06.2023	-	End of Contract
ASCO	M/V SHUSHA	Azerbaijan	Tanker	13010	-	7834	-	Watch Officer	16.10.2023	04.11.2023	-	End of Contract
CMS	M/V GANJA	Panama	Tanker	7017	-	5075	-	Watch Officer	13.11.2023	-	-	On Board

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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	YES

(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 authorize you to contact the referees listed above.
I have read it, I am familiar with it, I confirm with my signature.

Date: 26.02.2024

Signature

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