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Application Form

Section 1	Navigation Officer		
<i>Position Applied for</i>	Motorman		
<i>Lowest Position Acceptable</i>	Motorman		
<i>Date of Availability</i>	Any time		
Section 2	Personal Details		
<i>Family name / Surname</i>	Aghazade		
<i>First Name / Given Name</i>	Murad		
<i>Date & Place of Birth</i>	Date: 27.11.1998 Place: NEFTHCHALA, Azerbaijan		
<i>Nationality</i>	Azerbaijan		
<i>Permanent Address</i>	Azerbaijan, Nefthchala GIRMIXIKEND village.		
<i>Present Address</i>	Azerbaijan, NEFTHCHALA region, GIRNIZI KEND village.		
PPE information	<u>SAFETY SHOES SIZE</u>	41	<u>COVERALL SIZE</u> M
<i>Present Contact Number</i>			
<i>Mobile Number</i>	+994 51 600 82 98		
SKYPE ADDRESS	N/A		
<i>Email Address</i>	Agazademurad53@gmail.com		
<i>Nearest Airport (and Distance)</i>	Haydar Aliyev Baku International (GYD)		
Section 3	Passport and VISA details		
<i>Country of Issue</i>	Azerbaijan / Baku	<i>USA Visa - Type</i>	
<i>Date Issued</i>	27.08.2021	<i>USA VISA Expires</i>	
<i>Place Issued</i>	Azerbaijan	<i>USA Visa - Type</i>	
<i>Passport Number</i>	C03492285	<i>USA VISA Expires</i>	
<i>Passport –Expires</i>	26.08.2031	<i>Other Country Visa</i>	
<i>Secondary passport or Dual nationality</i>	N/A	<i>Visa Expiry</i>	
Section 4 (hi-light as required)	Seaman book / Discharge book / Seaman Record Book / CDC		
<i>Issuing Country & Place</i>	Azerbaijan	<i>Date Issued</i>	13.07.2023
<i>Number</i>	DQK 024381	<i>Expiry Date (if any)</i>	13.07.2028
Section 5	Next of Kin – this is important information we require- Don't ignore it		
<i>Full Name / Relationship</i>	AGHAYEV YUSIF father		
<i>Any dependents / Children (incl age)</i>	Not any		

Address	NefthchalaAzerbaijan
Contact Numbers	

Section 6 STCW95 Highest Certificate of Competency / Licence Held (also list Flag State Endorsements)

Class / Grade/Capacity	Issuing Country	Certificate No.	Date Issued	Expiry	Details of Limitations
Rating forming part of an Engine-Room WHATCH	Azerbaijan, Baku	1549 /23	05.07.2023	-----	A-III/4

ALSO ENTER ABOVE DETAILS OF ANY OTHER FLAG STATE CERTIFICATES HELD

Section 7 STCW95 Dangerous Cargo Endorsements

	Certificate No.	Date Issued	Expires	Details of Limitations/ Grade
<u>Petroleum.....</u>				
<u>Liquefied Gas.....</u>				
<u>Liquid Chemicals.....</u>				

Section 8 STCW95 related Courses Attended and Certificates Obtained

Name of Course / Certificate	STCW Code	Place	Issue Date	Cert No	Expiry Date
Mandatory minimum requirements for familiarization, basic safety training and instruction for all seafarers	A-VI/1-1, A-VI/1-2, A-VI/1-3, A-VI/1-4	Baku, Azerbaijan	30.05.2023	SO-2438-23	22.05.2028
Proficiency in survival craft and boats other than fast rescue boats	A-VI/2-1,2,3,4	Baku, Azerbaijan	30.05.2023	SL-1860-23	30.05.2028
Proficiency in Fast Rescue Boats	A-VI/2-1,2,3,4	Baku, Azerbaijan			
International safety Management Code	SOLAS IX	Baku, Azerbaijan	19.05.2023	SP-1571-23	18.05.2025
Ship Security-related training and instructing	A-IV/6, 1-4	Baku, Azerbaijan	24.05.2023	SI-1484-23	24.05.2028
Training for seafarers with designated security duties	A-IV/6-2	Baku, Azerbaijan	26.05.2023	SH-1243-23	26.05.2028
Training in advanced Fire – fighting	A-VI/3				
Medical First Aid	A-VI/4 Pa. 1, 2, 3				
Radar Observation and plotting	A-I/12, B-I/12				
Operational use of automatic radar plotting aids (ARPA)	A-I/12, B-I/12				
GMDSS General Operator	A-IV/2				
Operational Use of Electronic Chart Display and Information system (ECDIS)	A-II/1 A-II/2				
Bridge team and resources management	A-II/1 A-II/2				
Ship Handling and Maneuvering	A-II/1 A-II/2				
Crude Oil washing and inert gas system	A-V/1-1, B-V/1-1	Baku, Azerbaijan		SA-	
Dangerous, hazardous and harmful cargoes	B-V/b, B-V/c				
Basic training for oil and chemical tanker	A-V/1-1, A-V/1-1-1				
Leadership and Teamwork	AII/1,2				

Section 9 OFFSHORE INDUSTRY COURSES					
Please enter below any other certificates held or courses done, ie offshore, DP certs etc or Any other not already mentioned					
Name of Course / Certificate	APPROVALS	Place	Issue Date	Cert No	Expiry
BOSIET					
HUET					
FOET					
OFFSHORE MEDICALS (UK, NORWAY or NETHERLAND)	Uniklinika	Baku, Azerbaijan	17.05.2023	N/A	17.05.2025
Re-Breather training					
Initial Standby vessel crews training (ITSO)					
CAA (Civil Aviation Authorities – Helicopter)					
Advanced Medical Aider (AMA)					
HLO					
<i>MARLIN's English Test</i>					
IELTS-English TEST				SCORE	
PMS maintenance system Confirm that you are Familiar with its use (YES / NO)					
DEEP WATER ANCHOR HANDLING EXPERIENCE		ENTER DEPTH IN METERS			30-500 metres
DP Maintenance Courses					
DP Maintenance Courses					
HIGH VOLTAGE COURSE					
Dynamic Positioning Induction Course					
Dynamic Positioning Operators CERTIFICATE					
Section 10 Hours done with various DP system					
SYSTEM DETAILS	Approx Hours as SDPO / Approx Days in case of Senior ETO / Senior Engineer		Approx Hours as DPO / Approx Days in case of Junior ETO / Junior Engineer		
APPROXIMATE Total DP Hours in Various Operations					
SAT DIVING		CABLE LAYING			
AIR DIVING		SURVEY			
ROV		PIPE LAYING			
WELL STIMULATION / INTERVENTION / ACTIVATION		DRILL SHIP / SEMI SUB			
AHTS		PSV			
FPSO		SHUTTLE TANKER			
CONSTRUCTION		ROCK DUMPING / MATTRESSING			
CORING		TRENCHING			
HEAVY LIFT		ACCOMMODATION / GANGWAY			

Section 11 Medical History			
		YES	NO
Have you ever signed off a ship due medical reason?			x
Have you undergone any medical operations in past?			x
Have you consulted a doctor during the past 12 months for an illness / Accident			x
Do you have any health or disability problem now?			x
If answer to any of above is YES then give further details below or on a separate sheet			
Section 12 General			
		Yes	No
Have you ever been the subject of a court of enquiry or involved in a maritime accident			x
Have you ever had a professional licence suspended or revoked			x
Have you ever been convicted of any criminal offence?			x
Have you ever been dismissed			x
If yes to any of above then please full details below or on separate sheet of paper			
Section 13 References (Last Two Recent Employers)			
Name of company			
Name Person to be contacted			
Address			
Tel No		Fax	
Email			
Name of company			
Name Person to be contacted			
Address			
Tel No		Fax	
Email			
Section 14 Any other information, you wish to add in support of your application			
Section 15 Declaration			
I hereby declare that the above particulars are true and I authorize you to contact the referees listed above And confirm that All my certificates / Licences are Authentic / SEASERVICE RECORD is ACCURATE / And I confirm accepting Companies DRUG & ALCOHOL Policy			

SEA EXPERIENCE (LAST 5 YEARS – MOST RECENT EXPERIENCE ON TOP LINE)

Vessel	Company	Type of vessel	Flag	DWT	GRT	BHP	Rank	Sign on	Sign off