

2

5



APPLICATION FORM

1	Position	identity card PIN Number 1JG8QHV
	Position Applied for:	Officer in charge of an engineering watch
	Date Available from:	-

First Name: AZAR	Last Name: GAHRAMANOV
Date of Birth:16.07.1986	Place of Birth (City and Country): Azerbaijan, JALILABAD
Email: azər.qehremanov1986@mail.ru	Mobile Number: (+994) 55 328 15 15
Permanent Address: Jalilabad district, Azerbaijan	Expected Salary Per Month: -
Nationality: Azerbaijan	Alternative rank applying for: -

3	Family Details: (If Unmarried kindly give details of Father / Mother)											
	First Name	Last Name	Gender	Relation	Contact							
	Punhan	Gahramanov	Male	Father	+994505715263							

4	Maritime Education											
	Name of school	Country	From	То	Type of degree or diploma							
	-	-	-	-	-							

Physical Data	
Height	180
Weight	80
Boilersuit Size	XL
Shoes Size	43
Blood group	B(III)RH+

6	Seaman's Book & Identify Docs											
	DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY						
	Seaman Book	Azerbaijan	DQK 019274	03.02.2022	Azerbaijan	03.02.2027						

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

Certificate of Competency	Azerbaijan	000	06739	18.03.2022	Azerba	aijan	18.03.2027
Republic of Azerbaijan	Azerbaijan	C02	983688	28.03.2021	Azerbaijan		27.03.2031
Seaman Book Flag State	Panama	PA0	285887	27.07.2022	Panama		18.03.2027
Do you hold a US Vis	a 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	a 'B1/B2'?	YES/NO NO		Issue Date:	- Expiry		Date:-
Have you been reject	ed for any visa app	lied for?		YES/NO	NO		
If YES, please state th	ne country and reas	sons	-	•			

Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8 License

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

9

STCW Certificates & Trainings						
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry	
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-0683-21	SMPA	27.04.2021	26.04.2020	
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0683-21	SMPA	27.04.2021	26.04.2020	
ELEMENTARY FIRST AID	Azerbaijan	SO-0683-21	SMPA	27.04.2021	26.04.2020	
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0683-21	SMPA	27.04.2021	26.04.202	
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0683-21	SMPA	27.04.2021	26.04.202	
International Safety Management	Azerbaijan	SP-0334-21	SMPA	31.03.2021	31.03.202	
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0509-21	SMPA	07.05.2021	07.05.2020	
Security Awareness Training For All Seafarers	Azerbaijan		SMPA			
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0273-22	SMPA	04.03.2022	04.03.202	
Eugenie-room resource management;(STCW Code, A-III/1, III/2, III/3, VIII/2)	Azerbaijan	ER-0162-22	SMPA	17.03.2022	22.02.202	
Leadership & Teamwork	Azerbaijan	DL-0800-22	SMPA	18.05.2022	18.05.202	
Advanced Training in Fire Fighting	Azerbaijan	SJ-0763-21	SMPA	06.09.2021	03.09.2020	
Updating	Azerbaijan	XS-0106-19	SMPA	08.05.2019	08.05.2024	
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan		SMPA			
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan		SMPA			
Medical First Aid	Azerbaijan	SN-0489-22	SMPA	13.05.2022	11.05.202	

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

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
DAYDAYLIL AR SHIPPING	M/V WHITE IWY	Panama	Dry Cargo	1638 3	Mitsubis hi	-	-	Second Engineer	07.07.2022	29.09.2022	3 month	End of Contract
DAYDAYLIL AR SHIPPING	M/V LIBERTA	Panama	Dry Cargo	1638 3	MAN	-	-	Second Engineer	01.10.2022	10.11.2022	2 month	End of Contract
FEYZ GROUP	M/V OCEAN SKY	Panama	Dry Cargo	1860 0	MAN	666	-	Second Engineer	19.11.2022	-	-	On Board
			A									
			A									
							Th					

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

Generators	-					
Purifiers and Boilers	-					
Type of Cranes / No of Reefer Containers	-					
Other Experience						
-						
Travel Documents						
Name		YES/NO	Country NO		Date p	of Expir
Schengen US		YES/NO YES/NO	NO			-
China		YES/NO YES/NO	NO			-
Australia		YES/NO	NO			-
		·	1			
Insurance ,Health Related	Documentation					
Medical Certificate (Fit for D	Outy)				YES/NO	
		Vaccin	ation			-
\/ II =		Vaccin	ation			
Yellow Fever		Vacciii	ation		YES/NO	
Yellow Fever COVID-19 e answer is YES to any of the	e above, please give			necessa	YES/NO	
COVID-19	e above, please give			necessa	YES/NO	
COVID-19	e above, please give			necessa	YES/NO	
COVID-19 e answer is YES to any of the		e full details and at		necessa	YES/NO	
COVID-19 e answer is YES to any of the Medical history Have you ever signed off a Have you undergone any of	ship due to medical peration in the past?	e full details and at reasons?	itach a separate page if	necessa	YES/NO Ary) YES/NO YES/NO	
COVID-19 e answer is YES to any of the Medical history Have you ever signed off a Have you undergone any of Have you consulted a doctor	ship due to medical peration in the past? or during the last 12	reasons?	itach a separate page if	necessa	YES/NO YES/NO YES/NO YES/NO	
COVID-19 e answer is YES to any of the Medical history Have you ever signed off a Have you undergone any off Have you consulted a doctor Do you have any health or off	ship due to medical peration in the past? or during the last 12 disability problems r	reasons?	itach a separate page if	i necessa	YES/NO YES/NO YES/NO YES/NO YES/NO	
COVID-19 e answer is YES to any of the Medical history Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication	ship due to medical peration in the past? or during the last 12 disability problems r ns regularly?	reasons? months for an illne	etach a separate page if		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	
COVID-19 e answer is YES to any of the Medical history Have you ever signed off a Have you undergone any off Have you consulted a doctor Do you have any health or off	ship due to medical peration in the past? or during the last 12 disability problems r ns regularly?	reasons? months for an illne	etach a separate page if		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication (If the answer is YES to a	ship due to medical peration in the past? or during the last 12 disability problems r ns regularly?	reasons? months for an illne	etach a separate page if		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	
e answer is YES to any of the Medical history Have you ever signed off a Have you undergone any off Have you consulted a doctor Do you have any health or off Do you take any medication (If the answer is YES to a	ship due to medical peration in the past? or during the last 12 disability problems r ns regularly? any of the above, ple	reasons? months for an illne	ess/accident?		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication (If the answer is YES to a	ship due to medical peration in the past? or during the last 12 disability problems ras regularly? any of the above, place of a court of en	reasons? months for an illnead and at reasons? months for an illnead and at reasons? rease give full deta	ess/accident? ils and attach a separate page if		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	NO.
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doctor Do you have any health or of Do you take any medication (If the answer is YES to a	ship due to medical peration in the past? or during the last 12 disability problems ras regularly? any of the above, played of a court of ensional license suspensional stress of the suspensional suspe	reasons? months for an illner now? ease give full deta	ess/accident? ils and attach a separate a maritime accident?		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	NO.
Medical history Have you ever signed off a Have you consulted a doctor Do you have any health or or Do you take any medication (If the answer is YES to a	ship due to medical peration in the past? or during the last 12 disability problems ras regularly? any of the above, played of a court of ensional license suspensional stress of the suspensional suspe	reasons? months for an illner now? ease give full deta	ess/accident? ils and attach a separate a maritime accident?		YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO	NO.

Ship Management ISM&ISPS Management Ship Agency Consultations
Provision, Ship Supply

Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair

Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

16	References (Please give the	name and address of your current or immediate p	ast employer)
	Name of company	1-	2 -

Name of company	1	2
Name of person to contact	-	-
Address	-	-
☎ No.	-	-

17 Declaration			
	17	ı	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.

Signature

Date:	12.03.2024

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