

2

3

5

6



APPLICATION FORM

1	Position	identity card PIN Number 6H8HXU7					
	Position Applied for:	Rating forming part of a navigational watch					
	Date Available from:	-					

Personal InformationGender: MaleFirst Name: FAIGLast Name: FATAHOVDate of Birth: 27.05.1999Place of Birth (City and Country): Azerbaijan ,KHACHMAZEmail: fettahovfaiq@gmail.comMobile Number: (+90) 552 481 75 26Permanent Address: Azerbaijan , BakuExpected Salary Per Month: 1600\$Nationality: AzerbaijanAlternative rank applying for: Fitter , BoatswainPerson to call in emergency: (+994) 70 527 26 90 Brother

Family Details: (If Unmarried kindly give details of Father / Mother) Gender Relation First Name **Last Name Contact** Fariz Fatahov Male Brother 070 527 26 90 Ilgar Fatahov Male Father 055 546 45 15

 Maritime Education

 Name of school
 Country
 From
 To
 Type of degree or diploma

 Azerbaijan State Marine Academy
 Azerbaijan
 2016
 2020
 Bachelor

Height

Height

To

Weight

Boilersuit Size

L

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 |

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

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

Seaman Book	Azerbaijan	DQK 019425		05.03.2022	Aze	erbaijan	05.03.2027
Certificate of Competency	Azerbaijan	RP	10292	02.02.2021	Aze	erbaijan	-
Republic of Azerbaijan	Azerbaijan	C02	074359	03.08.2018	Aze	erbaijan	02.06.2028
Seaman Book Flag State	St Kitts & Nevis	CDC133577		09.05.2022	St Kit	ts & Nevis	09.05.2027
Do you hold a US Vis	a '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 reject		YES/NO	NO				
If YES, please state the	-						

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-0920-22	ASMA	09.03.2022	09.03.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0920-22	ASMA	09.03.2022	09.03.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-0920-22	ASMA	09.03.2022	09.03.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0920-22	ASMA	09.03.2022	09.03.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0920-22	ASMA	09.03.2022	09.03.2027
International Safety Management	Azerbaijan	SP-0625-22	ASMA	16.03.2022	11.03.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0470-22	ASMA	04.03.2022	04.03.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-06922-22	ASMA	01.04.2022	29.03.2027
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0497-22	ASMA	08.05.2022	05.04.2027

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

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

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
CUNDA SHIPPING LTD	M/V ARSLANBEY	Panama	Dry Cargo	3200		9090		A/B	08.04.2021	08.08.2021	4 month	End of Contract
CUNDA SHIPPING LTD	M/V ARSLANBEY	Panama	Dry Cargo	3200		AN	CE	Boatswain	09.08.2021	15.02.2022	6 month	End of Contract
ARIZONA SHIPPING COMPANT	M/V WINNER	Marshall Island	Bulk Carrier	7400 0	-	-	-	Boatswain/Wel der	07.04.2022	08.09.2022	4 month	End of Contract
PACIFIC SHIPPING COMPANY	M/V GULF RAIN	St Kitts	General Cargo	3700		-	-	Boatswain	02.10.2022	01.05.2023	5 month	End of Contract
PACIFIC SHIPPING COMPANY	M/V GULF RAIN	St Kitts	General Cargo	3700		-	J.	Boatswain	01.08.2023	03.01.2024	5 month	End of Contract

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

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		<u> </u>
US		YES/NO	NO		-
China		YES/NO	NO		-
Australia		YES/NO	NO		-
Insurance ,Health Related	d Documentation				
Medical Certificate (Fit for				YES/NO	YE
·		Vaccina	ation		
Yellow Fever				YES/NO	YE
COVID-19				YES/NO	YE
anower to 120 to any or an					
e answer is YES to any of th	g				
Medical history					
Medical history Have you ever signed off a	ship due to medical			YES/NO	
Medical history Have you ever signed off a Have you undergone any of	ship due to medical	?	use/accident?	YES/NO	N
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct	ship due to medical operation in the past? or during the last 12	months for an illne	ess/accident?	YES/NO YES/NO	N N
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct Do you have any health or	ship due to medical operation in the past? or during the last 12 disability problems n	months for an illne	ess/accident?	YES/NO YES/NO YES/NO	N N N
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct	ship due to medical operation in the past? or during the last 12 disability problems not regularly?	months for an illne		YES/NO YES/NO YES/NO YES/NO	N N N
Medical history Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medicatio	ship due to medical operation in the past? or during the last 12 disability problems not regularly?	months for an illne		YES/NO YES/NO YES/NO YES/NO	No No
Medical history Have you ever signed off a Have you undergone any o Have you consulted a doct Do you have any health or Do you take any medicatio	ship due to medical operation in the past? or during the last 12 disability problems not regularly?	months for an illne		YES/NO YES/NO YES/NO YES/NO	N N N
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct Do you have any health or Do you take any medicatio (If the answer is YES to	ship due to medical operation in the past? or during the last 12 disability problems n ns regularly? any of the above, ple	months for an illne now? ease give full detai	ls and attach a separate	YES/NO YES/NO YES/NO YES/NO	N N N N
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct Do you have any health or Do you take any medicatio (If the answer is YES to	ship due to medical operation in the past? or during the last 12 disability problems not regularly? any of the above, please of the above of the ab	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
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct Do you have any health or Do you take any medicatio (If the answer is YES to General Have you ever been the su	ship due to medical operation in the past? or during the last 12 disability problems not regularly? any of the above, please of a court of enessional license suspense.	months for an illne now? ease give full detain quiry or involved intended or revoked?	Is and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	N N N N
Medical history Have you ever signed off a Have you undergone any of Have you consulted a doct Do you have any health or Do you take any medicatio (If the answer is YES to General Have you ever been the su Have you ever had a profes	ship due to medical operation in the past? or during the last 12 disability problems not regularly? any of the above, please of a court of enessional license suspense.	months for an illne now? ease give full detain quiry or involved intended or revoked?	Is and attach a separate	YES/NO YES/NO YES/NO YES/NO Page if necessary	N N N N

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

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

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

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

17	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

Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair