



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

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Position		identity card PIN Number 6H3GVP7
Position Applied for:	Rating forming part of an Engine-Room watch	
Date Available from:	-	

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Personal Information		Gender: Male
First Name: JAMIL	Last Name: SEYIDOV	
Date of Birth: 30.08.1999	Place of Birth (City and Country): Azerbaijan , UJAR	
Email: cemil7120@gmail.com	Mobile Number: (+994) 51 363 87 18	
Permanent Address: Ujar district , Gazigumlag village, Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: -	
Person to call in emergency: (+994) 51620 89 01 Father		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Irshad	Seyidov	Male	Father	+994516208901
Yusif	Seyidov	Male	Brother	+994775777347

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Kainat Maritime MMC	Azerbaijan	10.2021	05.2022	Course

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Physical Data	
Height	175
Weight	72
Boilersuit Size	S
Shoes Size	43
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 021701		19.10.2022	Azerbaijan		19.10.2027
Certificate of Competency	Azerbaijan	RP11761		01.09.2022	Azerbaijan		-
Republic of Azerbaijan	Azerbaijan	C03753262		11.11.2022	Azerbaijan		10.11.2032
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 &amp; Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-1073-20	SMPA	11.09.2020	04.09.2025
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1073-20	SMPA	11.09.2020	04.09.2025
ELEMENTARY FIRST AID	Azerbaijan	SO-1073-20	SMPA	11.09.2020	04.09.2025
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1073-20	SMPA	11.09.2020	04.09.2025
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1073-20	SMPA	11.09.2020	04.09.2025
International Safety Management	Azerbaijan	SP-2616-22	SMPA	31.08.2022	18.08.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2595-22	SMPA	30.08.2022	12.08.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-0550-20	SMPA	09.09.2020	09.09.2025
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1755-22	SMPA	02.09.2022	21.07.2027
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0454-23	SMPA	09.06.2023	09.06.2028

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

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(Please give a full record starting with the last vessel on which you served)

[illegible]

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

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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
<b>Vaccination</b>		
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. EGES SHIPPING	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: 15.03.2024

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Signature

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