



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

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<b>Position</b>		<b>identity card PIN Number 6GA5F06</b>
<b>Position Applied for:</b>	Rating forming part of an engine- room watch	
<b>Date Available from:</b>	-	

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: SHAHMAR</b>	<b>Last Name: FEYZIYEV</b>	
Date of Birth: 09.01.1981	Place of Birth (City and Country): Azerbaijan , BAKU	
Email: s.n.feyziyev@gmail.com	Mobile Number: (+994) 50 342 01 15	
Permanent Address: Baku city, Khatai district , Zeytun street , Home 37a	Expected Salary Per Month: -	
Nationality: Azerbaijanian	Alternative rank applying for: -	
<b>Person to call in emergency: (+994) 55 234 34 32 Brother</b>		

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<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
<b>First Name</b>	<b>Last Name</b>	<b>Gender</b>	<b>Relation</b>	<b>Contact</b>
Sexavet	Feyziyev	Male	Brother	+994 55 234 34 32

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<b>Maritime Education</b>				
<b>Name of school</b>	<b>Country</b>	<b>From</b>	<b>To</b>	<b>Type of degree or diploma</b>
KAINAT EDUCATION CENTER	Azerbaijan	11.2016	04.2017	Course

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<b>Physical Data</b>	
Height	174
Weight	85
Boilersuit Size	XL
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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<b>Seaman`s Book &amp; Identify Docs</b>
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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

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 026974		01.03.2024	Azerbaijan		01.03.2029
Certificate of Competency	Azerbaijan	RP14530		21.02.2024	Azerbaijan		-
Republic of Azerbaijan	Azerbaijan	C03279510		15.03.2024	Azerbaijan		14.03.2034
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-0250-24	SMPA	31.01.2024	26.01.2029
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0250-24	SMPA	31.01.2024	26.01.2029
ELEMENTARY FIRST AID	Azerbaijan	SO-0250-24	SMPA	31.01.2024	26.01.2029
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0250-24	SMPA	31.01.2024	26.01.2029
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0250-24	SMPA	31.01.2024	26.01.2029
International Safety Management	Azerbaijan	SP-0174-24	SMPA	30.01.2024	22.01.2029
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0125-24	SMPA	19.01.2024	19.01.2029
Security Awareness Training For All Seafarers	Azerbaijan	SI-3937-23	SMPA	15.12.2023	08.12.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-3472-23	SMPA	21.12.2023	15.12.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-1038-23	SMPA	19.12.2023	14.12.2028

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

[illegible]

Yacht Management  
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- Bunker Supply
- Technical Services

<b>11</b>	<b>For Engineers (Please provide details)</b>
Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

<b>12</b>	<b>Other Experience</b>
-	

<b>12</b>	<b>Travel Documents</b>																			
<table border="1"> <thead> <tr> <th>Name</th> <th>YES/NO</th> <th>Country</th> <th>Date pf Expire</th> </tr> </thead> <tbody> <tr> <td>Schengen</td> <td>YES/NO</td> <td>NO</td> <td>-</td> </tr> <tr> <td>US</td> <td>YES/NO</td> <td>NO</td> <td>-</td> </tr> <tr> <td>China</td> <td>YES/NO</td> <td>NO</td> <td>-</td> </tr> <tr> <td>Australia</td> <td>YES/NO</td> <td>NO</td> <td>-</td> </tr> </tbody> </table>	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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China	YES/NO	NO	-																	
Australia	YES/NO	NO	-																	

<b>13</b>	<b>Insurance ,Health Related Documentation</b>	
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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<b>14</b>	<b>Medical history</b>	
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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<b>15</b>	<b>General</b>	
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: 27.03.2024

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 Signature

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