

## **PIYUSH KUMAR**

### **DECK CADET**

GENDER. : MALE

DATE OF BIRTH : 14/12/1999

NATIONALITY : INDIAN

MARTIAL STATUS. : UNMARRIED

LANGUAGE KNOWN. : ENGLISH, HINDI

**EDUCATION QUALIFICATION.** : BSC NAUTICAL SCIENCE

ADDRESS. : SECTOR -8

SECTOR -8/B, STREET NUMBER -19,QUARTER NUMBER -1218, BOKARO STEEL CITY,BOKARO JHARKHAND, PIN -827009.

**EMAIL ADDRESS.** : piyushsky95@gmail.com

CONTACT NUMBER. : +919031827052

### **OBJECTIVE**

- To be given the position of Deck cadet where I can utilize and contribute my technical skills.
- To give my highest standard of discipline, professionalism, excellent service, good moral character, and performance management to your company.

#### **RANK APPLIED FOR**

**DECK CADET** 

# **EDUCATIONAL QUALIFICATION**

SI NO.	BOARD/UNIVERSITY	EXAM NAME/COURSE	SCHOOL/INSTITUTE	YEAR
1.	ALAGAPPA UNIVERSITY	BSC NAUTICAL SCIENCE	SOUTHERN ACADEMY OF MARITIME STUDIES, CHENNAI.	2023
2.	CBSE	HIGHER SECONDARY	GURU GOBIND SINGH PUBLIC SCHOOL, BOKARO	2020
3.	CBSE	MATRICULATION	GURU GOBIND SINGH PUBLIC SCHOOL, BOKARO	2016

## **DOCUMENT DETAILS**

DOCUMENT	NUMBER	DATE OF ISSUE	VALIDITY	ISSUED FROM
PASSPORT	U3507060	04/11/2020	03/11/2030	RANCHI
INDOS	20NM2500	24/11/2020		MUMBAI
CDC	KOL 142238	15/06/2023	14/06/2033	KOLKATA
SID	K33894192	02/08/2023	01/08/2033	KOLKATA

## **STCW COURSE DETAILS.**

SL NO.	NAME OF THE COURSE	CERTIFICATE NUMBER	DATE OF ISSUE	INSTITUTE
1.	BASIC SAFETY TRAINING (STCW- BASIC)	402016661012300417	30/05/2023	SOUTHERN ACADEMY OF MARITIME STUDIES CHENNAI

2.	STSDSD	40201666212200911	21/02/2023	SOUTHERN ACADEMY OF MARITIME STUDIES CHENNAI
3.	BASIC TRAINING IN OIL AND CHEMICAL TANKER CARGO OPERATIONS	30300851112302210	04/11/2023	HOON MARITIME INSTITUTE.
4.	BASIC TRAINING IN LIQUIFIED GAS TANKER CARGO OPERATIONS	3030085121230249	10/11/2023	HOON MARITIME INSTITUTE

## **CERTIFICATE OF PROFICIENCY DETAILS.**

ТҮРЕ	Level	CERTIFICATE NUMBER	DATE OF ISSUE
OIL AND CHEMICAL	BASIC TRAINING	COPDGSOAC24125700	16/02/2024
LIQUIFIED GAS	BASIC TRAINING	COPDGSGAS24126485	01/03/2024

## **MEDICAL CERTIFICATE**

NAME OF THE DOCTOR: DR.SEYED ABOUL CADER

DGS APPROVAL NUMBER	PLACE OF ISSUE	DATE OF ISSUE	EXPIRY
TN/CH/23/2018	CHENNAI	25/05/2023	24/05/2024