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## **APPLICATION FORM**

1	Position	identity card PIN Number 7CK91DQ
	Position Applied for:	Electro-Technical Rating
	Date Available from:	-
	Date Available II oili.	

First Name: GOSHUNALI	Last Name: HASANOV
Date of Birth: 14.02.2000	Place of Birth (City and Country): Azerbaijan , TAR-TAR
Email: gasanov.adda@gmail.com	Mobile Number: (+994) 51 533 99 56
Permanent Address:2-170/2, 20 YANVAR STREET, Mingachevir district, Azerbaijan	Expected Salary Per Month: -
Nationality: Azerbaijan	Alternative rank applying for:-

3	Family Details: (If Unmarrie	ed kindly give details of Fa	ather / Mother)		
	First Name	Last Name	Gender	Relation	Contact
	Savalan	Hasanov	Male	Father	+994 55 480 41 09

4	Maritime Education	1			
	Name of school	Country	From	То	Type of degree or diploma
	Azerbaijan State Maine Academy	Azerbaijan	2017	2021	Course

Physical Data	
Height	182
Weight	62
Boilersuit Size	S
Shoes Size	42
Blood group	O(I)RH+

	Additional Physical	Information:{You	can write any other	information you want to add	l about your physique i	n this field.}
6	Seaman's Book & Id	dentify Docs				
	DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY

Ship Management Yacht Management Sale & Purchasing
ISM&ISPS Management Technical Management Ship Agency
Ship Agency Ship Brokering Exclusive Cargo Brokering
Consultations Surveying & Monitoring Bunker Supply
Provision, Ship Supply New Building & Repair 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	022906	14.03.2023	Azerbai	jan	04.03.2028
Certificate of Competency	Azerbaijan	RP	11631	28.07.2022	Azerbaij	jan	-
Republic of Azerbaijan	Azerbaijan	C02	542390	24.07.2019	Azerbaij	jan	23.07.2029
Seaman Boo Flag State	Panama	PA0	286697	13.09.2022	Panam	ıa	07.09.2027
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 rejecte	ed for any visa app	lied for?		YES/NO	NO		
If YES, please state the	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-1050-23	SMPA	06.03.2023	06.03.2028
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1050-23	SMPA	06.03.2023	06.03.2028
ELEMENTARY FIRST AID	Azerbaijan	SO-1050-23	SMPA	06.03.2023	06.03.2028
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1050-23	SMPA	06.03.2023	06.03.2028
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1050-23	SMPA	06.03.2023	06.03.2028
International Safety Management	Azerbaijan	SP-0672-23	SMPA	01.03.2023	01.03.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2259-22	SMPA	10.08.2022	10.08.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-0677-23	SMPA	02.03.2023	02.03.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1544-22	SMPA	12.08.2022	12.08.2027

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

## **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
-	-	-	-	-		-	-	-	-	-	-	-
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Purifiers and Boilers	-				
Type of Cranes / No of Reefer Containers	-				
Other Experience					
-					
Travel Documents					
Name		YES/NO	Country	Data	pf Expire
Schengen		YES/NO	NO	Date	- hi Exhile
US		YES/NO	NO		-
China		YES/NO	NO		-
Australia		YES/NO	NO		-
Insurance ,Health Related	Documentation				
Medical Certificate (Fit for D				VECALO	,
medical Certificate (FILIOFD	uty)	Vaccin	ation	YES/NO	1
Yellow Fever		¥400III		YES/NO	
COVID-19				YES/NO	,
answer is YES to any of the	above, please give	e full details and at	ttach a separate page if r	necessary)	
answer is YES to any of the	above, please give	e full details and at	ttach a separate page if r	necessary)	
	above, please give	e full details and at	ttach a separate page if r	necessary)	
Medical history			ttach a separate page if r		
Medical history Have you ever signed off a s	ship due to medica	I reasons?	ttach a separate page if r	YES/NO	
Medical history  Have you ever signed off a selection to the selection of	ship due to medica	I reasons?		YES/NO YES/NO	
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Name of company	1.		2.
Name of person to contact			
Address			
☎ No.			
Declaration			
hereby declare that the ab	pove particulars are true and a	uthorize you to contact	the referees listed above.
		-	
I have read it I am familiar	with it, I confirm with my signa	ture.	
r navo roda it, i am iamina			
- Thave road it, i airi iairiilai			
- That's road it, rain familia			
That's issue it, ruin lainina			

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Signature

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