



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

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<b>Position</b>	<b>identity card PIN Number 13KDKDH</b>
<b>Position Applied for:</b>	Able Seafarer Deck
<b>Date Available from:</b>	-

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: NURADDIN</b>	<b>Last Name: HASANOV</b>	
Date of Birth: 14.06.1973	Place of Birth (City and Country): Azerbaijan, ASTARA	
Email: <a href="mailto:qasanovnuraddin5@gmail.com">qasanovnuraddin5@gmail.com</a>	Mobile Number: (+994) 50 465 93 32	
Permanent Address: 42, 20 Yanvar street , Salyan district , Azerbaijan	Expected Salary Per Month: 1500\$	
Nationality: Azerbaijan	Alternative rank applying for: Boatswain	
Person to call in emergency: (+994) 50 401 86 340 Wife		

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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>
Gunay	Hasanova	Female	Wife	+994 50 401 86 340

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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>
Azerbaijan State Maritime College	Azerbaijan	1996	1997	Sub -Bachelor

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<b>Physical Data</b>	
Height	175
Weight	73
Boilersuit Size	XL
Shoes Size	42
Blood group	O(I)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](mailto: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 025164		23.09.2023	Azerbaijan		23.09.2028
Certificate of Competency	Azerbaijan	RP01585		18.09.2019	Azerbaijan		18.09.2029
Republic of Azerbaijan	Azerbaijan	C02383254		04.03.2019	Azerbaijan		03.03.2029
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 & Trainings**

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-3261-21	SMPA	30.11.2021	30.11.2026
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-3261-21	SMPA	30.11.2021	30.11.2026
ELEMENTARY FIRST AID	Azerbaijan	SO-3261-21	SMPA	30.11.2021	30.11.2026
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-3261-21	SMPA	30.11.2021	30.11.2026
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-3261-21	SMPA	30.11.2021	30.11.2026
International Safety Management	Azerbaijan	SP-2292-21	SMPA	14.12.2021	14.12.2026
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2386-21	SMPA	21.12.2021	21.12.2026
Security Awareness Training For All Seafarers	Azerbaijan	SI-2938-23	SMPA	11.09.2023	11.09.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0028-22	SMPA	28.01.2022	28.01.2027
Dangerous, hazardous and harmful cargoes	Azerbaijan	SK-0061-22	SMPA	16.02.2022	10.02.2027

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## 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
ASCO	M/V BALAKAN	Azerbaijan	Ro-Ro Cargo Ship	5398	-	8045	-	Able Seafarer Deck	10.11.2020	12.22.2020	1month 15 day	End of Contract
ASCO	M/V SHAIR VAGIF	Azerbaijan	General Cargo Ship	5495	Wartsila	4182	-	Able Seafarer Deck	22.01.2021	23.07.2021	6 month 1 days	End of Contract
ASCO	M/V HUSEYIN CAVID	Azerbaijan	Dry Cargo Ship	5464	Wartsila	4182	-	Able Seafarer Deck	19.02.2022	25.07.2022	5month 6 days	End of Contract
TDL SHIPPING LTD	M/V BELFAST	Tanzania	General Cargo Ship	3100	-	2491	-	Boatswain	30.08.2022	20.01.2023	4 month	Changer
ASCO	M/V NASIMI	Azerbaijan	Tanker	13030	9L20	7833	-	Able Seafarer Deck	07.03.2023	24.06.2023	3 month 12 days	End of Contract
ASCO	M/V RASUL RZA	Azerbaijan	Dry Cargo Ship	5454	Wartsila	4182	-	Able Seafarer Deck	26.09.2023	31.03.2024	6 month	End of Contract

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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**

Rus Language : Good  
Azerbaijan Language: Good

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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.-	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.



Signature

Date: 24.04.2024

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