



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

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<b>Position</b>	<b>identity card PIN Number 3078NMS</b>
<b>Position Applied for:</b>	Chief Engineer
<b>Date Available from:</b>	-

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: ILHAM</b>	<b>Last Name: PANAHLI</b>	
Date of Birth: 12.08.1963	Place of Birth (City and Country): Azerbaijan , BAKU	
Email: <a href="mailto:penahli@mail.ru">penahli@mail.ru</a>	Mobile Number: (+994) 55 721 97 76 +994 50 432 97 76	
Permanent Address: 128/28 , A.M.Sharifzadastreet , Baku , Azerbaijan	Expected Salary Per Month: 4000\$	
Nationality: Azerbaijan	Alternative rank applying for: -	
<b>Person to call in emergency: (+994) 55 530 01 88 Son</b>		

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<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
First Name	Last Name	Gender	Relation	Contact
Intigam	Panahli	Male	Son	+994 55 530 01 88

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<b>Maritime Education</b>				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	1988	1992	Bachelor

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<b>Physical Data</b>	
Height	<b>165</b>
Weight	72
Boilersuit Size	L
Shoes Size	41
Blood group	B(III)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 017026		03.02.2021	Azerbaijan		03.02.2026
Certificate of Competency	Azerbaijan	0003445		14.06.2023	Azerbaijan		17.05.2028
Republic of Azerbaijan	Azerbaijan	C04103682		12.09.2022	Azerbaijan		11.09.2032
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-1801-22	SMPA	21.04.2022	20.04.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1801-22	SMPA	21.04.2022	20.04.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-1801-22	SMPA	21.04.2022	20.04.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1801-22	SMPA	21.04.2022	20.04.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1801-22	SMPA	21.04.2022	20.04.2027
International Safety Management	Azerbaijan	SP-2762-22	SMPA	16.09.2022	26.08.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-3885-23	SMPA	20.10.2023	19.10.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-3063-22	SMPA	16.12.2022	07.12.2027
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0608-22	SMPA	21.04.2022	10.03.2027
Engine Resource Management	Azerbaijan	ER-0483-21	SMPA	18.11.2021	29.10.2026
Leadership & Teamwork	Azerbaijan	DL-0253-21	SMPA	31.03.2021	19.03.2026
Advanced Training in Fire Fighting	Azerbaijan	SJ-1323-22	SMPA	15.09.2022	22.08.2027
Medical First Aid	Azerbaijan	SN-1174-22	SMPA	15.09.2022	12.08.2027
Updating	Azerbaijan	XS-0324-23	SMPA	18.05.2023	17.05.2028
Dangerous, hazardous and harmful cargoes	Azerbaijan	SK-0166-24	SMPA	15.03.2024	05.03.2029
Dynamic Positioning equipment maintenance	Russia	DPM033/10	MTC	21.05.2010	-

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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
KNF	M/V MAMMAD SULEYMANOV	Azerbaijan	Survey Vessel	189	NDV	488	-	Second Engineer	14.03.2001	16.04.2006	5 year	End of Contract
BUE CASPIAN	M/V OM	Azerbaijan	AHTS	1394	Wartsila	1585	-	Second Engineer	25.04.2006	10.11.2006	7 month	End of Contract
BUE CASPIAN	M/V JURA	Azerbaijan	AHTS	2665	Wartsila	2554	-	Second Engineer	11.11.2006	05.01.2007	1 year	End of Contract
BUE CASPIAN	M/V CITADEL	Azerbaijan	PSV	3250	Bergen	2082	-	Second Engineer	06.01.2007	05.06.2007	5 month	End of Contract
BUE CASPIAN	M/V CASPIAN PRIDE	Azerbaijan	PSV	3194	Bergen	2265	-	Second Engineer	17.06.2007	14.07.2008	1 year	End of Contract
BUE CASPIAN	M/V CASPIAN QALA	Azerbaijan	PSV	3310	Cate pillar	2241	-	Chief Engineer	15.07.2008	03.04.2020	12 year	End of Contract
BUE CASPIAN	M/V BAKI	Azerbaijan	RRV	1355	Nigata	1894	-	Chief Engineer	05.04.2020	12.05.2021	1 year	End of Contract
BUE CASPIAN	M/V CASPIAN PROTECTOR	Azerbaijan	RRV	1671	Cate pillar	2108	-	Chief Engineer	12.06.2021	-	-	On Board

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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.-	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: 25.04.2024

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