Date:

Citizen ID:

Citizen ID:										
		A. S	SEAMAN'S APPL	ICATION I	FORM					
Rank (License held)			Position App	lying for						
Surname	DELIOGLU	J First Name	EYUP		Middle Name			С	AN	
Date of Birth		Place of Birth			Natio	nality	,			
Address	ORTAÇEŞN	1E HOŞGOR SOKAK	NO 64 İSTANBUL ,	/ BEYKOZ						
CellPhone No.	+90 54213198 1	Landline No.			Emai	l Addr	ess:		yupcan utlook.	_delioglu@ com
Father's Name	MUSTAFA		Mother's Name	YAŞAR	\\$AR					
		VOCATIONAL HIGH SCHOOL	School	ECOL MA	COL MARITIME					
Marital Status	□ YES	No X			Skype:					
Name of Beneficiary				Relation						
Address							tacts	Yakın.	telefonur	nu giriniz.
Seaman's Book No.	S 00306904	Placed Issued	16.10.2020	Date Is:	sued		0.2025	Date	Valid	
Passport no.	U 11139541	Placed Issued	02.06.2015	Date Is:		02.0	6.2025	Date	Valid	
USA VISA	Туре:		Date Issued :	2.2.7			Date Vo	alid :	dd/m	m/yy
Schengen VISA	Туре:		Date Issued :	dd/mm	n/yy	Date Valid : dd/mm/yy		m/yy		
Other Countries VISA	Туре:		Date Issued :	dd/mm	n/yy		Date Vo	alid :	dd/m	m/yy
English Ability	☐ Very G	ood	⊠ Good	X□	Fair			Poor		
Height (cm)		Weight (kg)		Date of	f Milita	ry Serv	vice:			

B. DOCUMENTATION							
Documents	Placed Issued	Date Issued	Date Expire				
Personnel Survival Techniques Training Certificates		15.10.2020	22.05.2025				
Elementary First Aid Training Certificate		15.10.2020	22.05.2025				
Fire Prevention and Fire Fighting Training Certificate		15.10.2020	22.05.2025				
Personnel safety and Social Responsibility Training Certificate		15.10.2020	22.05.2025				
Proficiency İn Survival Craft and Rescue Boats (other than fast rescue boats)							
Radar Observation and Plotting Training Certificates							
Plotting Aids (ARPA) Training Certificate							
ECDIS							
BRM							
ERM							
Medical First Aid Training Certificate							
Medical Care Training Certificate							
Advanced Fire Fighting Training Certificate							
Ship Security Officer Certificate							
Designated Security Duties Certificate0		15.10.2020	22.05.2025				



Security Awareness Certificate	15.10.2020	22.05.2025
Security -Related Familirazition Certificate	15.10.2020	22.05.2025
Oil Tanker Familiariztion Certificate		
Specialized Training Programme on Oil Tanker Oper. Cert.		
Chemical Tanker Familiariztion Certificate		
Specialized Training Prog. on chemical Tanker Oper. Cert.		
Liquefid Gas Tanker Familiariztion Certificate		
Specialized Training Prog. on Liquefid Gas Tanker Oper. Cert.		

Documents	Placed Issued	Date Issued	Date Expire
COC (CERTIFICATE OF COMPETENCE) – Number: 6 haneli olmalıdır.		dd/mm/yy	dd/mm/yy
GMDSS (GOC-ROC-REO) (mark) - Number: 6 haneli olmalıdır.		dd/mm/yy	dd/mm/yy
Vaccination Certificate		dd/mm/yy	
Drug & Alcohol Test		dd/mm/yy	dd/mm/yy
Pre-employment Medical Examination		dd/mm/yy	dd/mm/yy
Fast Rescue Boat		dd/mm/yy	dd/mm/yy
Training for Passenger Vessels		dd/mm/yy	dd/mm/yy
Medical Examination Certificate		dd/mm/yy	dd/mm/yy

Course Attended

TYPE OF SPECIFIC ECDIS (FURUNO, JRC, TRANSAS ETC.): Daha önce çalışmış olduğunuz ve sertifikası bulunan ECDIS tiplerini yazınız.

			C. ENI	DORSEMENT	TS				
Flag	Rank		N	Number		Date Issue		Date of Expire	
						dd/mm/yy		dd/mm/yy	
					dd/mm/y	у	dd/mm/	dd/mm/yy	
					dd/mm/y	у	dd/mm/	уу	
					dd/mm/y	у	dd/mm/	уу	
		D. F	PREVIOUS SEA	A SERVICE FO	OR TANKERS				
Rank	Master	C/O	2/0	3/0	C/E	2/E	3/E	4/E	
Years									
With Operator									
Years In Rank									
Type Of Tanker									
All Types of Tanker						12	8	9	

PARAGRAPH D WILL BE COMPLETED BY THE CREW OPERATOR BEFORE SENDING FOR APPROVAL TO SPECIFIC TANKER PRINCIPALS, THE YEARS WILL BE THE AGGREGATE OF BOTH PAIRS OF OFFICERS INDICATED (MASTER & C/O, C/E & 2/E, ETC

E. PREVIOUS SEA SERVICE (Start with the latest)										
☐ Ex- Crew ☐ New Crew										
Company	Vessel Name & Flag	Engine Type & BHP	DWT	Vessel Type & Year Built	Rank	Date Embarked (dd/mm/yy)	Date Disembarke d (dd/mm/yy)	Cause of Disch arge		
ADAKENT	ADASTAR LİBERYA	MAKIT A MAN6S 46ME	35000	2015 BULK CARRIER	3 RD ENG	01.08.2023	01.01.2024			



		MET EN	ÜSTTE OLI	MALIDIR. LÜTF	EN BÜTÜN DE	NIZ HIZMETLERİ	NİZİ SIRAYLA BI	ELIRTINIZ.SUTUI	V
EKLEYEBİLİRSI	INIZ.								
				E DE	EVIOUS EMPL	OVER			
Employer's Na	ime			r. Fr	LVIOUS LIVIFE	OTER			
Date Appointe						Position			
Allowance, if a						!	<u>'</u>		
Reason for lea	ving:								
Does your em		now you	ır						
leaving?									
When would y	ou able	to ente	r our comp	any?					
Any previous I						te the illness: _			
SAĞLIK DURU	MU İLE	AYRILDI	YSANIZ, NE	DENİNİ LÜTFE	N PAYLAŞINIZ	•			
CHARACTER R									
Two persons o	ther th	at relati	ves to who	m we can refei	regarding you	ırself.			
Name:		EYİN KA			Name:				
Company Address	ADA	KENT DE	NİZCİLİK		Company Address				
Tel/Cell No.		533 123	2270		Address Tel/Cell no.				
Period known:		555 125	22/9		— Period Kno				
renou known.									
	_								

3RD ENG

3RD ENG

15.06.2022

15.09.2021

15.03.2023

15.03.2022

ADAKENT

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LEGEND

TÜRKİYE

Date

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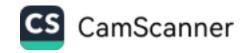
BULK

CARRIER

1996

BULK

CARRIER



Signature