

## **APPLICATION FORM**

PART OF A NAVIGATIONAL WATCH ID -648N828									
1. Personal I									
Family Nam ALIZADA	e:		First Name : NURID		Middle Name: MAHAMAD				
Date of Bir 06.05.1997	th:	ASTAR DISTRI				Citizenship AZERBAIJAN			
Permanent Address;  AZERBAIJAN ,ASTARA DIST		ARA DISTR	NICT.	]	Phone (Home): Phone (Business/ Mobile)+994509864252 Email:nuridalizade2@gm		nail.com		
2. Maritime									
Name of s IST MMC	school	Town LENKORAN	Country AZERBAI		From	То	Type of do	egree or diploma	
3. Professio	nol Tost			L					
English Test D			Name of Tes	st		Score			
Professional T	est Date		Name of Test		Score				
Professional In	nterview Dat	te	Result						
Next of Kin (the	le, Married, Sep	parated, Divorced, W	/idowed):			Relations	nip		
Address of Reside						Phone:			
E . 2 N	Daughter	Son							
Family Name		1				1		1	

First Name			
Date of Birth			
City of living			
Phone Numbers			

5. Identity Documents								
Document	Country	Number	Place of Issue	Issue Date	Expiry Date			
Seaman's	Azerbaijan	DQK027394	State of maritime	02.04.2024	02.04.2029			
Book			administration					
Travel	Azerbaijan	C02057575	Ministry of	17.07.2018	16.07.2028			
Passport			internal affairs					
Civil	Azerbaijan		RPI					
Passport								

6. Valid Visa						
Country or Union	Type	Valid Until				

7. Courses Attended and Certificates Obtained							
Document	Numbe		]	Dates	Place		
Document	Nullibe	1	Issue	Expiry	riace		
Certificate of Competency	RP14741	13.0	03.2024	13.03.2029	AZERBAIJAN		
Maltese Endorsement of COC							
Oil Tanker Endorsement							
Chemical Tanker Endorsement							
Gas Tanker Endorsement							
Oil Tanker Familiarization Training							
Chemical Tanker Familiarization Training							
Gas Tanker Familiarization Training							
Oil Tankers Specialized Training	SA-0034-24	26.0	01.2024	26.01.2029	AZERBAIJAN		
Chemical Tanker Specialized Training							
Gas Tanker Specialized Training							
Basic Trainings	SO-0428-24	19.02.2024		19.02.2029	AZERBAIJAN		
Proficiency in Survival Craft and Rescue Boats	SL-0433-24	26.02.2024		26.02.2029	AZERBAIJAN		
Advanced Fire Fighting							
Medical First Aid Training							
Medical First Aid Training and Medical Care							
GMDSS							
GMDSS Endorsement							
Radar Observation & Plotting							
Automatic Radar Plotting Aids Simulator (ARPA)							
Bridge Team Management							
Shiphandling & Maneuvering							
Ship Security-related familiarization security awareness training	SI-0564-24	14.0	02.2024	12.02.2029	AZERBAIJAN		
Maltese Endorsement of SSO							
ISM Code	SP-0571-24	06.0	03.2024	28.02.2029	AZERBAIJAN		
Safety Officer							
ECDISTraining Course							

Risk Assessment Course				
C.O.W./ I.G.S				
Fire Practice on Tankers				
Vapour Recovery System				
Unmanned Machinery Space				
FRAMO Familiarization Course				
Cargo Ballast Operations on Oil/Chemical Tankers				
Hazardous Materials				
Welder				
Turner				
Risk Management And Incident Investigation				
Training of seafarers with designated security duties in compliance with ISPS Code	SH-0333-24	05.02.2024	05.02.2029	AZERBAIJAN

8. Physical Data	
Height	166
Weight	80
Colour of Hair	CHESTNUT
Colour of Eyes	BROWN
Boilersuit Size	XL
Shoes Size	42

9. Medical History	Yes	No
Have you ever signed off a ship due to medical reasons?		+
Did you undergo any medical operation in the past?		+
Have you consulted a doctor during the last 12 months for an illness/accident?		+
Do you have any health or disability problems now?		+

If yes, please give full details:

	Passed:	Valid till:
International Medical Examination	01.09.2023	01.09.2025
Vaccination Against Yellow Fiver		
Vaccination Against Diphtheria		

10. References (please give name and	10. References (please give name and address of your current or past employer)					
Name of Company						
Name of person to contact						
Address						
Phone						
Name of Company						
Name of person to contact						
Address	_					
Phone	_					

11. Bank address for allotme	ents		
Beneficiary			
Account No.			
Name of Bank			
Bank Address			
		1	
12. Knowledge and experien	Yes	No	
OCIMF vetting experience:			
ISGOT knowledge:			
13. I hereby declare that the	above, including Medical His	story, is true	
Place	Date	Signature	
14. For Office use only			

## 15. Seagoing Experience

Name of vessel	Flag	Vessel' s Type	DWT	Eng Typ e	НР	Manage r or Owner	Rank	From d/m/y	To d/m/y	Total m/d

## Total rank sea service: Total type of vessel sea service:

Rank	Years	Type of vessel	Years
		OIL TANKER	
		LPG	
		DRY CARGO	
		TANKER ICE	
		OIL /CHEMICAL	
		TANKER	
		FERRY	
Total		Total:	