



**SEAFARER'S APPLICATION FORM**

Family Name	Valiyev	First Name (s)	Kanan
Birth Date	19.09.1998	Birth Place	Azerbaijan
Nationality	Azerbaijan	Marital Status	Single
ADDRESS (include telephone country & area codes, advise also secondary or contact addresses if any)			
Street &Nr.	Siyazan		
Location	Azerbaijan	Mobile Phone wp	+994 70 900 10 64
City	Khizi	Mobile phone call	+994 55 393 19 93
State, Country	Azerbaijan		
REMARKS			
Requested Rank	O/S-II IV-Ordinary Seaman		
Prefer. Vessel Type	All types		
Languages	Azerbaijan Turkish		
Professional School / Academy	Kaspian Education Center LLC		

**- TRAVEL DOCUMENTS AND MEDICAL CERTIFICATES**

Document Name (Description)	Document Number	Country	Issue Place	Issue Date	Exp. Date
Passport	C03271597	Azerbaijan	MIA	18.01.2024	17.01.2034
Seaman’s Book (national)	DQK 027076	Azerbaijan	ASMA	07.03.2024	07.03.2029
Medical Certificate	AA5678810	Azerbaijan	Uniklinika	11.07.2023	11.07.2025
COC	0289/24	Azerbaijan	ASMA	14.02.2024	Unlimited
Proficiency in survival Craft and	SL – 2912-23	Azerbaijan	ASMA	08.08.2023	08.08.2028
International Safety Management	SP – 2704-23	Azerbaijan	ASMA	10.08.2023	10.08.2028
-Safety familiarization traning					
Ship security-related					
Training for seafarers with designated security duties	SH – 2111-23	Azerbaijan	ASMA	04.08.2023	04.08.2028

Updated: 21.05.2024