



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



## APPLICATION FORM

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Position		identity card PIN Number 6KPSQUG
Position Applied for:	Electro -Technical Officer	
Date Available from:	-	

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Personal Information		Gender: Male
First Name: KHUBYAR	Last Name: AYDINOV	
Date of Birth: 01.05.1999	Place of Birth (City and Country): Azerbaijan, SALYAN	
Email: <a href="mailto:xubyar99aydinov@gmail.com">xubyar99aydinov@gmail.com</a>	Mobile Number: (+994) 51 448 85 47	
Permanent Address: Kursengi village , Salyan district , Azerbaijan	Expected Salary Per Month: 2500\$	
Nationality: Azerbaijan	Alternative rank applying for: -	
Person to call in emergency: (+994) 50 788 68 31 Brother		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Haybat	Aydinov	Male	Brother	+994 50 788 68 31

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	2016	2020	Bachelor

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Physical Data	
Height	175
Weight	85
Boilersuit Size	XXL
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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Seaman`s Book & Identify Docs
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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 019463	12.03.2022	Azerbaijan	12.03.2027
Certificate of Competency	Azerbaijan	0007796	10.04.2023	Azerbaijan	10.04.2028
Republic of Azerbaijan	Azerbaijan	C03083988	17.03.2020	Azerbaijan	16.03.2030
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-2738-21	SMPA	18.10.2021	07.10.2026
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-2738-21	SMPA	18.10.2021	07.10.2026
ELEMENTARY FIRST AID	Azerbaijan	SO-2738-21	SMPA	18.10.2021	07.10.2026
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-2738-21	SMPA	18.10.2021	07.10.2026
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-2738-21	SMPA	18.10.2021	07.10.2026
International Safety Management	Azerbaijan	SP-1936-21	SMPA	28.10.2021	21.10.2026
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1747-21	SMPA	15.10.2021	14.10.2026
Security Awareness Training For All Seafarers	Azerbaijan	SI-1285-21	SMPA	29.10.2021	25.10.2021
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1031-21	SMPA	12.11.2021	28.10.2026
Medical First Aid	Azerbaijan	SN-0296-23	SMPA	23.02.2023	23.02.2028
Leadership & Teamwork	Azerbaijan	DL-0056-23	SMPA	30.01.2023	26.01.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-0213-23	SMPA	15.02.2023	03.02.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0358-21	SMPA	12.11.2021	12.11.2026
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	SB-0012-24	SMPA	23.01.2024	23.01.2029
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan	-	SMPA	-	-
Dangerous , hazardous and harmful cargoes	Azerbaijan	SK-0110-23	SMPA	17.02.2023	17.02.2028
Crowd management training	Azerbaijan	SC-0032-23	SMPA	15.02.2023	09.02.2028
1000v	Azerbaijan	DM-0295-23	SMPA	08.12.2023	08.12.2028
Crisis management and Human behaviour training	Azerbaijan	SE-0006-23	SMPA	18.01.2023	18.01.2028

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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 AK.HASAN ALIYEV	Azerbaijan	Ferry Boat	3950	Diesel	11450	-	Probationer	29.06.2017	23.10.2017	3 months 26 days	End of Contract
ASCO	M/V NAKHCIVAN	Azerbaijan	Ferry Boat	5985	Diesel	8547	-	Probationer	28.01.2019	24.05.2019	3months 27days	End of Contract
ASCO	M/V AK.HASAN ALIYEV	Azerbaijan	Ferry Boat	3950	Diesel	11450	-	Electro-Technical Rating	07.09.2022	16.12.2022	3 months 8 days	End of Contract
ASCO	M/V SHAHDAG	Azerbaijan	Ferry Boat	5991	Diesel	8547	-	Electro-Technical Rating	08.04.2022	19.06.2022	2months 12 days	End of Contract
ASCO	M/V MIKAYIL MUSFIG	Azerbaijan	General Cargo Ship	4150	Diesel	3714	-	Electro-Technical Rating	13.04.2023	07.07.2023	2 months 23days	End of Contract
ASCO	M/V MIKAYIL MUSFIG	Azerbaijan	General Cargo Ship	4150	Diesel	3714	-	Electro-Technical Officer	08.08.2023	09.11.2023	4 month	End of Contract
ASCO	M/V MIKAYIL MUSFIG	Azerbaijan	General Cargo Ship	4150	Diesel	3714	-	Electro-Technical Officer	17.02.2024	01.06.2024	4 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**

Azerbaijan Language: Excellent  
Turkish 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.

Date: 03.06.2024

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Signature

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