



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position		identity card PIN Number 1KBVTP5
Position Applied for:	Rating forming part of an engine-room watch	
Date Available from:	-	

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Personal Information		Gender: Male
First Name: ELVIN	Last Name: GASIMOV	
Date of Birth: 10.12.1986	Place of Birth (City and Country): Azerbaijan, LANKARAN	
Email: gasimov341@gmail.com	Mobile Number: (+994) 50 341 00 33 ; (+994) 55 404 37 34	
Permanent Address: Garmatuk settlement, Lankaran district, Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: A/B	
Person to call in emergency: (+994) 50 335 04 35 Brother		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Tusi	Gasimov	Male	Brother	+99450 335 04 35

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Kiev State Marine Academy	Ukraine	2013	2017	Bachelor

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Physical Data	
Height	172
Weight	90
Boilersuit Size	2XL
Shoes Size	43
Blood group	O(I)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

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 Tel: +994 51 277 19 31

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 019925		20.04.2022	Azerbaijan		20.04.2027
Certificate of Competency	Azerbaijan	RP04873		06.09.2023	Azerbaijan		-
Certificate of Competency	Azerbaijan	RP04873		23.06.2021	Azerbaijan		-
Republic of Azerbaijan	Azerbaijan	C03881754		31.03.2022	Azerbaijan		30.03.2032
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 & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-1286-21	SMPA	23.06.2021	23.06.2026
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1286-21	SMPA	23.06.2021	23.06.2026
ELEMENTARY FIRST AID	Azerbaijan	SO-1286-21	SMPA	23.06.2021	23.06.2026
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1286-21	SMPA	23.06.2021	23.06.2026
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1286-21	SMPA	23.06.2021	23.06.2026
International Safety Management	Azerbaijan	SP-0694-23	SMPA	01.03.2023	01.03.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0702-23	SMPA	24.02.2023	24.02.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-0698-23	SMPA	02.03.2023	02.03.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0376-23	SMPA	22.02.2023	22.02.2028
Eugenie-room resource management	Azerbaijan	ER-0152-19	SMPA	26.08.2019	26.08.2024
Leadership & Teamwork	Azerbaijan	DL-0244-19	SMPA	24.08.2019	24.08.2024
Advanced Training in Fire Fighting	Azerbaijan	SJ-0761-19	SMPA	29.08.2019	29.08.2024
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0274-21	SMPA	01.09.2021	01.09.2026
Medical First Aid	Azerbaijan	SN-0578-19	SMPA	19.08.2019	19.08.2024

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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
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Seismic Research Vessel	1400	Rolls-Royce	3779	-	A/B	25.07.2011	19.03.2014	2 years	End of Contract
CMS	M/V GURBAN ABBASOV	Azerbaijan	Crane Vessel	3343		21497	-	A/B	09.09.2014	03.08.2015	11 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Seismic Research Vessel	1400	Rolls-Royce	3779	-	A/B	11.08.2015	03.08.2016	1 years	End of Contract
GEOKINETICS COMPANY	M/V TZ-418	Azerbaijan	Seismic Research Vessel	-	-	-	-	A/B	03.05.2016	03.01.2017	8 months	End of Contract
PALMALI SHIPPING	M/V NAKHCIVAN	Palau	Dry Cargo Ship	6933	Wartsila	5684	-	Motorman	14.05.2018	23.10.2018	6 months	End of Contract
CONSUL SHIPPING LIMITED	M/V CONSUL	Tanzania	Dry Cargo Ship	3436	-	2827	-	Motorman	27.09.2021	29.03.2022	6 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Seismic Research Vessel	1400	Rolls-Royce	3779	-	Motorman	15.06.2022	30.12.2023	7 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Seismic Research Vessel	1400	Rolls-Royce	3779	-	Motorman	20.01.2024	30.06.2024	6 months	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

Russian Language: Good
English Language : Middle

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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
Vaccination		
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: 24.06.2024

Signature

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