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APPLICATION FORM

1	Position	identity card PIN Number 11AXVD8
	Position Applied for:	Officer in charge of a navigational watch
	Date Available from:	-

First Name: TEYYUB	Last Name: ALKHASOV
Date of Birth: 24.0.1985	Place of Birth (City and Country): Azerbaijan, GUBA
Email: teyyubalxasov0@gmail.com	Mobile Number: (+994) 55 932 35 23 ; (+994023) 326 94 25
Permanent Address: Armudpadar village, Khacmaz district, Azerbaijan	Expected Salary Per Month: -
Nationality: Azerbaijan	Alternative rank applying for: 2 ND OFF

3	Family Details: (If Unmarried kindly give details of Father / Mother)											
	First Name	Last Name	Gender	Relation	Contact							
	Almas	Alkhasov	Male	Father	+994 50 489 45 75							

Maritime Education Name of school	Country	From	То	Type of degree or diploma
Volga State University Of Water Transport	Russia	2016	2023	Bachelor

Physical Data	
Height	170
Weight	98
Boilersuit Size	XXL
Shoes Size	43
Blood group	O(I)RH-
	ou can write any other information you want to add about your physique in this field.}

6 Seaman's Book & Identify Docs

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DOCUMENT COUNTRY		NUMBER		DATE OF ISSUE	PLACE (OF ISSUE	DATE OF EXPIRY	
Seaman Book	Azerbaijan	DQK	014700	19.07.2019	Azerbaijan		19.07.2024	
Certificate of Competency	Azerbaijan	000	07199	26.02.2021	Azerbaijan		26.02.2026	
Republic of Azerbaijan	Azerbaijan	C04	060053	28.01.2022	Azerbaijan		27.01.2032	
Do you hold a US Vis	sa 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -	
Do you hold a US Vis	sa 'B1/B2'?	YES/NO NO		Issue Date:	- Expiry		Date:-	
Have you been reject	ted for any visa app	lied for?		YES/NO	NO			
If YES, please state t	he country and rea	sons		-				

Professional Test 7

Professional Test Date	Name of Test	Score
-	-	-

License

Name	Issuing Country	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

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Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-1604-20	SMPA	30.11.2020	27.11.2025
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1604-20	SMPA	30.11.2020	27.11.2025
ELEMENTARY FIRST AID	Azerbaijan	SO-1604-20	SMPA	30.11.2020	27.11.2025
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1604-20	SMPA	30.11.2020	27.11.2025
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1604-20	SMPA	30.11.2020	27.11.2025
International Safety Management	Azerbaijan	SP-0421-20	SMPA	04.06.2020	02.06.2025
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1112-20	SMPA	18.11.2020	18.11.2025
Security Awareness Training For All Seafarers	Azerbaijan	SI-1220-19	SMPA	08.05.2019	03.05.2024
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0746-19	SMPA	10.05.2019	07.05.2024
Crowd Management training	Azerbaijan	SC-0106-20	SMPA	09.06.2020	04.06.2025
Leadership & Teamwork	Azerbaijan	DL-1035-23	SMPA	15.12.2023	14.12.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-149523	SMPA	01.12.2023	30.11.2028
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	-	SMPA	-	-
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	SB-0174-23	SMPA	09.06.2023	09.06.2028
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan	AS-0075-23	SMPA	16.06.2023	13.06.2028
Medical First Aid	Azerbaijan	SN-1855-23	SMPA	20.12.2023	20.12.2028
Medical Care	Azerbaijan		SMPA		
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0336-19	SMPA	19.07.2019	19.07.2024
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SQ-0417-23	SMPA	10.10.2023	10.10.2028
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0696-23	SMPA	27.12.2023	27.12.2028
Bridge Resource Management	Azerbaijan	SW-0008-24	SMPA	12.01.2024	12.01.2029
Ship Handling and Maneuvering	Azerbaijan		SMPA		
Ship`s Gas Analysers and Their Operations	Azerbaijan	ST-0133-23	SMPA	06.12.2023	04.12.2028

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Dangerous , hazardous and harmful	Azerbaijan	SK-0415-20	SMPA	11.12.2020	11.12.2025
cargoes	Azerbaijari				

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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 UZEIR HAJIBAYLI	Azerbaijan	General Cargo Ship	5491	-	4182	-	Able Seafarer	19.07.2019	-	-	End of Contract
ASCO	M/V GAFUR MAMMADOV	Azerbaijan	Oil Products Tanker	1233 4		7807	-	Able Seafarer	02.08.2019	-	-	End of Contract
ASCO	M/V BARDA	Azerbaijan	Ro-Ro Cargo Ship	5398	-	8045	-	Able Seafarer	12.06.2020	-	-	End of Contract
ASCO	M/V AGDAM	Azerbaijan	Ro-Ro Cargo Ship	5946	-	8547	-	Able Seafarer	25.12.2020	-	-	End of Contract
ASCO	M/V KOROGLU	Azerbaijan	Oil Products Tanker	1303 0	-	7842	L	Watch Officer	09.03.2021	-	-	End of Contract
ASCO	M/V GENERAL ASLANOV	Azerbaijan	General Cargo Ship	5499	-	4182	-	Watch Officer	15.04.2022	-	-	End of Contract
ASCO	M/V JAFAR JABBARLI	Azerbaijan	General Cargo Ship	4150	-	3714		Watch Officer	13.02.2023	-	-	End of Contract
ASCO	M/V RASUL RZA	Azerbaijan	General Cargo Ship	5454	-	4182	Ţ-)	Watch Officer	19.05.2023	-	-	End of Contract
ASCO	M/V LACHIN	Azerbaijan	Oil Products Tanker	7757	-	5371	-	Watch Officer	07.06.2023	-	-	End of Contract

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ASCO	M/V RASUL	Azerbaijan	General	5454	-	4182	-	Watch Officer	05.02.2024	-	-	On Board
	RZA		Cargo Ship									
			'									

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11	For Engineers	(Please provide details)

Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

Other Experience

Russian Language: Average Turkish Language: Good

Travel Documents 12

Name	YES/NO	Country	Date pf Expire
hengen	YES/NO	NO	-
S	YES/NO	NO	-
China	YES/NO	NO	=
Australia	YES/NO	NO	=

13 **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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16 References (Please give the name and address of your current or immediate past employer)

Name of company	1.ASCO	2
Name of person to contact	-	-
Address	Azerbaijan/Baku	-
☎ No.	-	-

17	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:	26.06.2024	
Signature			

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