



APPLICATION FORM

1	Position	identity card PIN Number 24QK4X9
	Position Applied for:	Officer in charge of an engineering watch
	Date Available from:	-

Personal Information Gender: Male 2 First Name: VUGAR Last Name: HAJIZADA Date of Birth: 01.02.1987 Place of Birth (City and Country): Azerbaijan, BAKU Email: vugarhacizade@gmail.com Mobile Number: (+994) 77 450 77 54 Permanent Address: Mashtaga settlement, Expected Salary Per Month: 3500\$-4000\$ Sabunchu district, Baku city, Azerbaijan Nationality: Azerbaijan Alternative rank applying for: -Person to call in emergency: (+994) 77 393 41 41 Brother-in -Law

Family Details: (If Unmarried kindly give details of Father / Mother)

First Name Last Name Gender Relation Contact

Hikmat Huseynov Male Brother -in-law +994773934141

 Maritime Education

 Name of school
 Country
 From
 To
 Type of degree or diploma

 Azerbaijan Marine Fishing School
 Azerbaijan
 2008
 2012
 Sub-Bachelor

Height

Height

Weight

Boilersuit Size

Shoes Size

Blood group

Additional Physical Information:{You can write any other information you want to add about your physique in this field.}

Seaman's Book & Identify Docs

DOCUMENT COUNTRY NUMBER DATE OF ISSUE PLACE OF ISSUE DATE OF EXPIRY

Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair

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Seaman Book	Azerbaijan	DQK 022160		07.12.2022	Aze	erbaijan	07.12.2027
Certificate of Competency	Azerbaijan	0007671		28.11.2022	Aze	erbaijan	28.11.2027
Republic of Azerbaijan	Azerbaijan	C02	392935	08.05.2019	Aze	erbaijan	07.05.2029
Seaman Book Flag State	Panama	PA0465486		16.06.2023	Pa	nama	28.11.2027
Do you hold a US Visa	Do you hold a US Visa 'C1/D'?		NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Visa	YES/NO NO Issue		Issue Date:	-	Expiry	Date:-	
Have you been rejected for any visa applied for?			YES/NO	NO	•		
If YES, please state the country and reasons				-			

7 Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8 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 TECHNICS	Azerbaijan	SO-4386-22	SMPA	23.09.2022	09.09.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-4386-22	SMPA	23.09.2022	09.09.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-4386-22	SMPA	23.09.2022	09.09.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-4386-22	SMPA	23.09.2022	09.09.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-4386-22	SMPA	23.09.2022	09.09.2027
International Safety Management	Azerbaijan	SP-2859-22	SMPA	22.09.2022	06.09.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2956-22	SMPA	21.09.2022	05.09.2027
Security Awareness Training For All Seafarers	Azerbaijan	-	SMPA	-	-
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1908-22	SMPA	2309.2022	11.08.2027
Eugenie-room resource management	Azerbaijan	ER-0573-22	SMPA	20.09.2022	19.09.2027
Leadership & Teamwork	Azerbaijan	DL-1527-22	SMPA	21.09.2022	31.08.2027
Advanced Training in Fire Fighting	Azerbaijan	SJ-1349-22	SMPA	20.09.2022	02.09.2027
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	10	SMPA	11.02.2023	22.02.2028
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	4	SMPA	21.02.2023	21.02.2028
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan	6	SMPA	20.02.2023	20.02.2028

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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
SEALIFE DENIZCILIK LIMITED	M/V ORIS HELGA	Panama	Chemical/ Oil Products Tanker	7739	MAK	5001		3 RD ENG	03.03.2023	11.09.2023	192 days	End of Contract
SEALIFE DENIZCILIK LIMITED	M/V HAMSI	Liberia	Chemical/ Oil Products Tanker	8941	MAK	6206	CF	3 RD ENG	04.10.2023	16.11.2023	1 months	Own Will
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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

11	For Engineers (Please provide details)							
	Generators	-						
	Purifiers and Boilers	-						
	Type of Cranes / No of							

Other Experience

Reefer Containers

Russian Language : Good English Language; Average

12 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	-

Insurance ,Health Related Documentation 13

Medical Certificate (Fit for Duty)	YES/NO	YES
Vaccina	ation	
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)

Medical history

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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)

Ship Management ISM&ISPS Management **Ship Agency** Consultations Provision, Ship Supply

Yacht Management **Technical Management** Ship Brokering Surveying & Monitoring New Building & Repair

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

Name of company	1.SEALIFE DENIZCILIK LIMITED	2
Name of person to contact	-	-
Address	-	-
■ No.	+90 535 686 27 65	-

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:	09.07.2024
0: /		

Signature

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