

## **APPLICATION FORM**

Position Applied for COOK

Position A ID -34AY	r COOK		Date Available from:						
1. Personal I	Data Data								
Family Name			Name : IRI		Middle Name: KHALIG				
Date of Bir 14.12.1988	th:	LAN DIST	of Birth : KARAN RICT, RBAIJAN	Citizenship AZERBAIJAN					
Permanent A	,			Phone (Home): Phone (Business/					
2. Maritime									
	Name of school Town KAINAT MARITIME BAKU MMC			Country From CRBAIJAN			To Type of degree or diploma  KM-000557		
3. Professio	nal Test								
English Test D	Pate		Name of Test			Score			
Professional T	est Date		Name of Test			Score			
Professional Ir	nterview Date		Result						
4. Family D Civil Status(Single		rated, Divorced, W	/idowed) :						
Next of Kin (the first emergency contact) Address of Residence						Relations Phone:	ship		
	Daughter	Son	Son			<u> </u>			
Family Name									
First Name									
Date of Birth									
City of living									
Phone Numbers									

5. Identity Documents									
Document	Country	Number	Place of Issue	Issue Date	Expiry Date				
Seaman's	Azerbaijan	DQK027596	State of maritime	16.04.2024	16.04.2029				
Book			administration						
Travel	Azerbaijan	C03902632	Ministry of	17.10.2023	16.10.2033				
Passport			internal affairs						
Civil	Azerbaijan	AA4576051	ASAN		01.03.2033				
Passport									

6. Valid Visa			
Country or Union	Type	Valid Until	

7. Courses Attended and Certificates Obtained									
Document	Number Issue		Dates Expiry	Place					
Certificate of Competency	RP14821	01.	04.2024	01.04.2029	AZERBAIJAN				
Maltese Endorsement of COC									
Oil Tanker Endorsement									
Chemical Tanker Endorsement									
Gas Tanker Endorsement									
Oil Tanker Familiarization Training	SA-0021-24	18.	01.2024	18.01.2024	AZERBAIJAN				
Chemical Tanker Familiarization Training									
Gas Tanker Familiarization Training									
Oil Tankers Specialized Training									
Chemical Tanker Specialized Training									
Gas Tanker Specialized Training									
Basic Trainings	SO-0514-24	23.	02.2024	23.02.2029	AZERBAIJAN				
Proficiency in Survival Craft and Rescue Boats	SL-0243-24	01.	02.2024	26.01.2029	AZERBAIJAN				
Advanced Fire Fighting									
Medical First Aid Training									
Medical First Aid Training and Medical Care									
GMDSS									
GMDSS Endorsement									
Radar Observation & Plotting									
Automatic Radar Plotting Aids Simulator (ARPA)									
Bridge Team Management									
Shiphandling & Maneuvering									
Ship Security-related familiarization security awareness training	SI-0155-24	19.	01.2024	19.01.2029	AZERBAIJAN				
Maltese Endorsement of SSO									
ISM Code	SP-0109-24	17.	01.2024	17.01.2029	AZERBAIJAN				
Safety Officer									
ECDISTraining Course									
Risk Assessment Course									
C.O.W./ I.G.S									
Fire Practice on Tankers									
Vapour Recovery System									

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Unmanned Machinery Space							
FRAMO Familiarization Course							
Cargo Ballast Operations on Oil/Chemical Tankers							
Hazardous Materials							
Welder							
Turner							
Risk Management And Incident Investigation							
Training of seafarers with designated security duties in compliance with ISPS Code	S	H-0185-24	19.01.2024	16.01.20	029	AZERBAIJA	AN
8. Physical Data							
Height		167					
Weight		52					
Colour of Hair		CHEST	NUT				
Colour of Eyes		BROWN					
Boilersuit Size		M					
Shoes Size		36					
O Madical History						Yes	Nic
<b>9. Medical History</b> Have you ever signed off a ship of	1,,,,	o modical	maasams?			res	No
							+
Did you undergo any medical ope Have you consulted a doctor duri							+
illness/accident?	ing t	ne iast 12 i	monuis for an	L			+
Do you have any health or disabi	lity i	nrohleme r	10W2				+
If yes, please give full details:	пту	problems i	iow:				Т Т
if yes, pieuse give fun detains.							
		Passed:		,	Valid	till:	
International Medical Examination	on	09.01.202	4	09.0	.01.2026		
Vaccination Against Yellow Five							
Vaccination Against Diphtheria							
vaccination riganist Diphtheria							
				1		_	
10. References (please give name and ad	ldress (	of your current of	or past employer)	Office	rem	arks	
Name of Company							
Name of person to contact							
Address							
Phone							
Name of Company							
Name of person to contact							
Address							
Phone							
11 Dl11 6 11							
11. Bank address for allotments Beneficiary	S						
Account No.							
Name of Bank							
INAILIE OI DAIIK							
Bank Address							

12. Knowledge and experien	ce	Yes	No					
OCIMF vetting experience:								
ISGOT knowledge:								
13. I hereby declare that the above, including Medical History, is true								
Place	Date	Signature						
14. For Office use only								
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## 15. Seagoing Experience

Flag	Vessel 's Type	DWT	Manager or Owner	Rank	From d/m/y	To d/m/y	Total m/d
	Flag	Flag 's	Flag 's DWT	Flag 's DWT Manager or Owner	Flag 's DWT Manager Rank	Flag 's DWT Manager Rank From d/m/y	Flag 's DWT Manager Rank From To

## Total rank sea service: Total type of vessel sea service:

Rank	Years	Type of vessel	Years
		OIL TANKER	
		LPG	
		DRY CARGO	
		TANKER ICE	
		OIL /CHEMICAL	
		TANKER	
		FERRY	
Total		Total:	