



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

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<b>Position</b>	<b>identity card PIN Number 680129399050</b>
<b>Position Applied for:</b>	Officer in charge of a navigational watch
<b>Date Available from:</b>	-

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: SAKHAVAT</b>	<b>Last Name: ISMAYILOV</b>	
Date of Birth: 29.01.1968	Place of Birth (City and Country): Azerbaijan, ASTARA	
Email: <a href="mailto:ismayilovnurlan99@gmail.com">ismayilovnurlan99@gmail.com</a>	Mobile Number: (+7) 70527710 26	
Permanent Address: Baku city, Nizami district, B,Nuriyev street 158	Expected Salary Per Month:	
Nationality: Kazakhstan	Alternative rank applying for: 3 <sup>RD</sup> Officer	
<b>Person to call in emergency: (+994) 51 433 93 14</b>		

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<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
First Name	Last Name	Gender	Relation	Contact
Nurlan	Ismayilzada	Male	Son	+994 51 433 93 14

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<b>Maritime Education</b>				
Name of school	Country	From	To	Type of degree or diploma
Baku Maritime School of the	Azerbaijan	1996	1997	Secondary Education
Baku Maritime Preparatory School	Azerbaijan	1998	2002	Vocational Secondary
Yessenov University	Kazakhstan	2022	Present	Bachelor

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<b>Physical Data</b>	
Height	<b>180</b>
Weight	76
Boilersuit Size	XL
Shoes Size	42-43
Blood group	A(I)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

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 Chemenzemli 119c, Afen Plaza Business Center 5nd floor, apt 13 **Email:** [crewing@unitedalliancegroup.com](mailto:crewing@unitedalliancegroup.com) **Tel:** +994 51 277 19 31

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## Seaman`s Book &amp; Identify Docs

DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY
Seaman Book	Kazakhstan	MK 0001343	14.07.2023	Kazakhstan	13.07.2028
Certificate of Competency	Azerbaijan	0004721	20.12.2022	Azerbaijan	17.11.2027
Republic of Azerbaijan	Kazakhstan	N15858419	14.08.2023	Kazakhstan	13.08.2033
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 TECHNICS	Azerbaijan	SO-5589-22	SMPA	22.11.2022	14.11.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-5589-22	SMPA	22.11.2022	14.11.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-5589-22	SMPA	22.11.2022	14.11.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-5589-22	SMPA	22.11.2022	14.11.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-5589-22	SMPA	22.11.2022	14.11.2027
International Safety Management	Azerbaijan	-	SMPA	-	-
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-3763-22	SMPA	23.11.2022	18.11.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-4005-23	SMPA	15.12.2023	15.12.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-3036-23	SMPA	20.11.2023	17.11.2028
Updating	Azerbaijan	XS-1356-22	SMPA	22.11.2022	17.11.2027
Leadership & Teamwork	Azerbaijan	DL-1060-23	SMPA	30.12.2023	30.12.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-1644-22	SMPA	18.11.2022	15.11.2027
Medical First Aid	Azerbaijan	SN-1517-22	SMPA	2.11.2022	11.11.2027
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0678-23	SMPA	22.12.2023	22.12.2028
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SR-0121-22	SMPA	18.11.2022	17.11.2027
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0650-23	SMPA	07.12.2023	30.11.2028
Bridge Resource Management	Azerbaijan	SW-0529-23	SMPA	24.11.2023	23.11.2028

Ship Management  
ISM&ISPS Management  
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(Please give a full record starting with the last vessel on which you served)

[illegible]

- Ship Management
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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 : Excellent  
 Azerbaijan Language : Excellent  
 Turkish Language : Excellent  
 English Language : Average  
 Kazakhstan 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: 07.08.2024

\_\_\_\_\_  
Signature

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