



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position	identity card PIN Number
Position Applied for:	2 ND Officer
Date Available from:	

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Personal Information	Gender: Male
First Name: SEYMUR	Last Name: MAYILOV
Date of Birth: 08.10.2000	Place of Birth (City and Country): Azerbaijan, KHACMAZ
Email:-	Mobile Number: (+994) 51 705 94 46 ;(+994) 51 705 94 46
Permanent Address: Azerbaijan , Khacmaz district , Khudat	Expected Salary Per Month:-
Nationality: Azerbaijan	Alternative rank applying for: -
Person to call in emergency: (+994) 70 744 17 18 Brother	

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Gurban	Mayilov	Male	Brother	+994 70 744 17 18

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	2017	2021	Bachelor

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Physical Data	
Height	178
Weight	80
Boilersuit Size	L
Shoes Size	43
Blood group	-
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

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Seaman`s Book & Identify Docs

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 022025		24.11.2022	Azerbaijan		24.11.2027
Certificate of Competency	Azerbaijan	001031/23		28.09.2023	Azerbaijan		28.09.2028
Republic of Azerbaijan	Azerbaijan	C02564350		01.05.2019	Azerbaijan		30.04.2029
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-5571-22	SMPA	22.11.2022	21.11.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-5571-22	SMPA	22.11.2022	21.11.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-5571-22	SMPA	22.11.2022	21.11.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-5571-22	SMPA	22.11.2022	21.11.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-5571-22	SMPA	22.11.2022	21.11.2027
International Safety Management	Azerbaijan	SP-3473-22	SMPA	24.11.2022	24.11.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2441-22	SMPA	19.08.2022	01.08.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-2893-22	SMPA	22.11.2022	22.11.2027
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1591-22	SMPA	17.08.2022	14.07.2027
Medical First Aid	Azerbaijan	SN-1276-23	SMPA	22.08.2023	22.08.2028
Leadership & Teamwork	Azerbaijan	DL-0729-23	SMPA	01.09.2023	01.09.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-1081-23	SMPA	28.08.2023	28.08.2028
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0207-21	SMPA	20.04.2021	16.04.2026
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SR-0048-21	SMPA	14.04.2021	14.04.2026
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0202-21	SMPA	20.04.2021	20.04.2026

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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

(Please give a full record starting with the last vessel on which you served)

[illegible]

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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

English Language : Intermediate
 Russian Language : Fluent
 Turkish Language : Fluent
 Arabian Language : A1

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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.ASCO	2.CUNDA SHUIPPING LTD
Name of person to contact	-	-
Address	Azerbaijan /Baku	Turkey/Istanbul
☎ No.	+994 12 404 39 00	-

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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: 15.08.2024

Signature

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