## **APPLICATION FORM**

|  |  |             |        |  |  |  | 6 | Z | D | G | v | R | Z |  |
|--|--|-------------|--------|--|--|--|---|---|---|---|---|---|---|--|
|  |  | Personal ID | Number |  |  |  |   |   |   |   |   |   |   |  |
|  |  |             |        |  |  |  |   |   |   |   |   |   |   |  |



| Position Applied for: Electrician (III/6) | Date Available from: ANY TIME |
|---|-------------------------------|
|   |                               |

| 1. PersonalData           |                                    |                             |  |  |  |  |
|---------------------------|------------------------------------|-----------------------------|--|--|--|--|
|                           |                                    |                             |  |  |  |  |
| Family Name: Ahmadli      | First Name: Asim                   | Middle Name: Rahim          |  |  |  |  |
|                           |                                    |                             |  |  |  |  |
| Date of Birth: 11.01.2002 | Place of<br>Birth:Azerbaijan/Shaki | Citizenship: Azerbaijani    |  |  |  |  |
|                           | <b>,</b>                           |                             |  |  |  |  |
|                           |                                    | Phone (Home): 051 358 88 55 |  |  |  |  |
| Permanent Address:        | Whatshapp +994501 3588855          |                             |  |  |  |  |
|                           | E-mail: asimhmdli285@gmail.com     |                             |  |  |  |  |
|                           |                                    |                             |  |  |  |  |

| 2. MaritimeEducation               |      |            |      |      |                           |  |  |  |
|------------------------------------|------|------------|------|------|---------------------------|--|--|--|
| Nameofschool                       | Town | Country    | From | То   | Type of degree or diploma |  |  |  |
| Azerbaijan State<br>Marine Academy | Baku | Azerbaijan | 2019 | 2023 | Bachelor                  |  |  |  |
|                                    |      |            |      |      |                           |  |  |  |

| 3. ProfessionalTest         |             |        |
|-----------------------------|-------------|--------|
| EnglishTest Date            | Nameof Test | Score  |
| Professional TestDate       | Nameof Test | Score  |
| Professional Interview Date |             | Result |

| 4. FamilyDetails  |                      |
|---|----------------------|
|   |                      |
| Civil Status (Single, Married, Separated, Divorced, Widowed): S | ingle                |
| Next of Kin (the first emergency contact):                      | Relationship /Father |
| Address of Residence:  Azerbaijan/Celilabad                     | (055) 890 60 76      |
|   |                      |

| 5. IdentityDocum | ients      |            |                                 |            |            |
|------------------|------------|------------|---------------------------------|------------|------------|
| Document         | Country    | Number     | PlaceofIssue                    | IssueDate  | ExpiryDate |
| Seaman'sBook     | Azerbaijan | DQK 018152 | State Maritime<br>Adminstration | 11.08.2021 | 11.08.2026 |
| TravelPassport   | Azerbaijan | C02982055  | Ministry of Internal<br>Affairs | 23.06.2021 | 22.06.2031 |

| CountryorUnion                                | Тур | e |       | ValidUntil |       |  |
|---|-----|---|-------|------------|-------|--|
|   |     |   |       |            |       |  |
|   |     |   |       |            |       |  |
|   |     |   |       |            |       |  |
|   |     |   |       |            |       |  |
|   |     |   |       |            |       |  |
|   |     |   |       |            |       |  |
| 7. Courses Attended and Certificates Obtained |     |   |       |            |       |  |
|   |     |   | Dates |            |       |  |
| Document Nur                                  |     | r |       |            | Place |  |
|   |     |   | Issue | Expiry     |       |  |
|   |     |   |       |            |       |  |

6. ValidVisa

| CertificateofCompetency                           | RP-13090   | 13.06.2023 | 13.06.2033 | State Maritime Administration |
|---|------------|------------|------------|-------------------------------|
| MalteseEndorsementof COC                          |            |            |            |                               |
| OilTankerEndorsement                              |            |            |            |                               |
| ChemicalTankerEndorsement                         |            |            |            |                               |
| GasTankerEndorsement                              |            |            |            |                               |
| OilTankerFamiliarizationTraining                  |            |            |            |                               |
| ChemicalTankerFamiliarizationTra ining            |            |            |            |                               |
| GasTankerFamiliarizationTraining                  |            |            |            |                               |
| OilTankersSpecializedTraining                     |            |            |            |                               |
| ChemicalTankerSpecializedTrainin g                |            |            |            |                               |
| GasTankerSpecializedTraining                      |            |            |            |                               |
| BasicTrainings                                    | SO-1759-21 | 23.07.2021 | 31.05.2026 | State Maritime Administration |
| Proficiency in Survival Craft and<br>Rescue Boats | SL-2596-24 | 06.08.2024 | 01.08.2029 | State Maritime Administration |
|   |            |            |            |                               |

| AdvancedFireFighting  |            |            |            |                               |
|---|------------|------------|------------|-------------------------------|
| MedicalFirstAidTraining   |            |            |            |                               |
| Medical First Aid Training and<br>Medical Care                    |            |            |            |                               |
| GMDSS   |            |            |            |                               |
| GMDSS Endorsement   |            |            |            |                               |
| RadarObservation&Plotting   |            |            |            |                               |
| Automatic Radar Plotting Aids<br>Simulator (ARPA)                 |            |            |            |                               |
| BridgeTeamManagement  |            |            |            |                               |
| Shiphandling&Maneuvering  |            |            |            |                               |
| Ship Security-related familiarization security-awareness training | SI-0872-21 | 17.07.2021 | 04.06.2026 | State Maritime Administration |
| MalteseEndorsementof SSO  |            |            |            |                               |
| ISM Code  | SP-1332-21 | 30.07.2021 | 02.06.2026 | State Maritime Administration |
| SafetyOfficer   |            |            |            |                               |
| ECDISTrainingCourse   |            |            |            |                               |

| RiskAssessmentCourse                                  |            |            |                                   |
|---|------------|------------|-----------------------------------|
| C.O.W./ I.G.S   |            |            |                                   |
| FirePracticeonTankers                                 |            |            |                                   |
| VapourRecoverySystem                                  |            |            |                                   |
| UnmannedMachinerySpace                                |            |            |                                   |
| FRAMO FamiliarizationCourse                           |            |            |                                   |
| Cargo Ballast Operations on<br>Oil/Chemical Tankers   |            |            |                                   |
| HazardousMaterials                                    |            |            |                                   |
| Welder  |            |            |                                   |
| Turner  |            |            |                                   |
| Risk Management And Incident<br>Investigation         |            |            |                                   |
| Training of seafarers with designated security duties |            |            |                                   |
| Dangerous hazardous and harmfull cargoes              | SH-2404-24 | 07.08.2024 | <br>State Maritime Administration |

| BasicTraining and qualifications on oil and chemical tanker cargo operations |  |  |
|--|--|--|
| Crowd management training  |  |  |

| 8. PhysicalData |        |
|-----------------|--------|
| Height          | 184 sm |
| Weight          | 85 kg  |
| ColourofHair    | Black  |
| ColourofEyes    | Black  |
| BoilersuitSize  | XXL    |
| ShoesSize       | 43     |

| 9. MedicalHistory  |          | Yes | No        |  |  |  |
|--|----------|-----|-----------|--|--|--|
|  |          |     |           |  |  |  |
| Have you ever signed off a ship due to m                 |          |     |           |  |  |  |
| Did you undergo any medical operation                    |          |     |           |  |  |  |
| Have you consulted a doctor during the illness/accident? |          |     |           |  |  |  |
| Do you have any health or disability pro                 |          |     |           |  |  |  |
|  |          |     |           |  |  |  |
| If yes, please give full details:                        |          |     |           |  |  |  |
|  |          |     |           |  |  |  |
|  | Passed:  | V   | alidtill: |  |  |  |
| International Medical Examination                        | 28.07.24 | 25  | 25.07.26  |  |  |  |
| Vaccination Against YellowFiver                          |          |     |           |  |  |  |
| Vaccination Against Diphtheria                           |          |     |           |  |  |  |
|  |          |     |           |  |  |  |

| <b>10. References</b> (please give name and a employer) | Officeremarks |  |
|---|---------------|--|
|   |               |  |
|   |               |  |
| NameofCompany   |               |  |
| Name of person to contact                               |               |  |
| Address   |               |  |
| Phone   |               |  |
|   |               |  |
| NameofCompany   |               |  |
| Name of person to contact                               |               |  |
| Address   |               |  |
| Phone   |               |  |
|   |               |  |

| 11. Bank address forallotments  |                            |  |  |  |  |  |
|---|----------------------------|--|--|--|--|--|
|   |                            |  |  |  |  |  |
| Beneficiary   |                            |  |  |  |  |  |
| AccountNo.  |                            |  |  |  |  |  |
| NameofBank  |                            |  |  |  |  |  |
| BankAddress   |                            |  |  |  |  |  |
|   |                            |  |  |  |  |  |
| 12. Knowledgeandexperience  | 12. Knowledgeandexperience |  |  |  |  |  |
| OCIMF vetting experience:   |                            |  |  |  |  |  |
| ISGOT knowledge:  |                            |  |  |  |  |  |
|   |                            |  |  |  |  |  |
| 13. I hereby declare that the above, including Medical History, is true |                            |  |  |  |  |  |
| Place   |                            |  |  |  |  |  |
|   |                            |  |  |  |  |  |
|   |                            |  |  |  |  |  |
| 14. ForOfficeuseonly  |                            |  |  |  |  |  |

## 15. Seagoing Experience

| Nameofvessel | Flag       | Vessel'sType      | DWT   | EngType | НР | Manageror Owner  | Rank         | From d/m/y | Tod/m/y    | Total<br>m/d   |
|--------------|------------|-------------------|-------|---------|----|--|--------------|------------|------------|----------------|
| Merkuri-1    | Azerbaijan | Passenger<br>ship | 3950  | Diesel  |    | Azerbaijan Caspian<br>Shipping Closed<br>Joint-Stock Company | practitioner | 18.06.2020 | 28.09.2020 | 3 m, 10 d.     |
| Sabit Orucov | Azerbaijan | Passenger<br>ship | 3950  | Diesel  |    | Azerbaijan Caspian<br>Shipping Closed<br>Joint-Stock Company | practitioner | 01.06.2021 | 28.09.2021 | 3 m, 28 d.     |
| Dada Gorgud  | Azerbaijan | Oil tanker        | 3950  | Diesel  |    | Azerbaijan Caspian<br>Shipping Closed<br>Joint-Stock Company | electrician  | 18.06.2022 | 28.09.2022 | 3 m, 10 d.     |
| Şirvan       | Azerbaijan | Crane             | 11159 | Diesel  |    | Azerbaijan Caspian<br>Shipping Closed Joint<br>Company       | electrician  | 02.02.2023 | 22.06.2023 | 4 m, 20 d      |
| Total        |            |                   |       |         |    |  |              |            |            | 1 y, 2 m. 8 d. |

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

| Rank       | Years | Typeofvessel           | Years |
|------------|-------|------------------------|-------|
| Electrican |       | OIL TANKER             |       |
|            |       | LPG                    |       |
|            |       | DRY CARGO              |       |
|            |       | TANKER ICE             |       |
|            |       | OIL/CHEMICAL<br>TANKER |       |
|            |       | FERRY                  |       |
| Total      |       | Total:                 |       |