



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position	identity card PIN Number 51FAG5F
Position Applied for:	Officer in charge of an engineering watch
Date Available from:	12.13.2023

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Personal Information		Gender: Male
First Name: HACI	Last Name: MIRZEYEV	
Date of Birth: 20.06.1991	Place of Birth (City and Country): Azerbaijan, SABIRABAD	
Email: -	Mobile Number: (+994) 55 306 10 33	
Permanent Address: Sabirabad district , Azerbaijan	Expected Salary Per Month: 3000\$	
Nationality: Azerbaijan	Alternative rank applying for: Officer in charge of an engineering watch	
Person to call in emergency: (+90 539 567 75 71 PINAR		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Hafiz	Mirzeyev	Male	Father	051 932 50 49

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
OSMU	Russia	2018	2022	Bachelor

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Physical Data	
Height	190
Weight	85
Boilersuit Size	XL
Shoes Size	45
Blood group	O(I)RH)+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

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Seamen`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

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

Seaman Book	Azerbaijan	DQK 019388		02.03.2022	Azerbaijan		02.03.2027
Certificate of Competency	Azerbaijan	0008011		21.11.2023	Azerbaijan		21.11.2028
Republic of Azerbaijan	Azerbaijan	C01344282		07.09.2017	Azerbaijan		06.09.2027
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	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijan	ASMA, BAKU	21.11.2023
Flag State Endorsements	Panama City	Panama	30.03.2027

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STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Russian	AC – 1901331	BRIG	10.02.2022	10.02.2027
FIRE PREVENTION & FIRE FIGHTING	Russian	AC – 1901331	BRIG	10.02.2022	10.02.2027
ELEMENTARY FIRST AID	Russian	AC – 1901331	BRIG	10.02.2022	10.02.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Russian	AC – 1901331	BRIG	10.02.2022	10.02.2027
SAFETY FAMILIARIZATION TRAINING	Russian	AC – 1901331	BRIG	10.02.2022	10.02.2027
International Safety Management	Azerbaijan				
Proficiency in Survival Craft & Rescue Boats	Russian	AC – 1901759	BRIG	04.02.2022	04.02.2027
Medical First Aid	Azerbaijan	SN-1387-23	UAG	11.09.2023	11.09.2028
Security Training For Seafarers With Designated Security Duties	Russian	AC – 1849239	BRIG	08.02.2022	08.02.2027
Ship Security Officer	Azerbaijan		UAG		
Leadership & Teamwork	Azerbaijan	DL-0785-23	UAG	18.09.2023	18.09.2028
Advanced Training in Fire Fighting	Azerbaijan	SJ-1174-23	UAG	14.09.2023	14.09.2028
Eugenie-room resource management	Azerbaijan	ER-0269-23	UAG	21.09.2023	21.09.2028

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(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

-

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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. STATU	2. GN GROUP
Name of person to contact	SEVVAL ACAR	ALI ALIYEV
Address	ISTANBUL, BESTEKAR SELLAHATIN PINAR SOKAK NO108 , USKUDAR ISTANBUL TURKIYE	KOSU YOLU, CENAP SAHABEDDIN SOKAGI 34 718, KADIKOY ISTANBUL.
☎ No.	+90 530 222 26 85	+90 546 679 62 52

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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 mu signature.

Date: 05.09.2024

Signature

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