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<b>EMPLOYMENT APPLICATION FORM</b>			

Name of Applicant:	Zulalov (Surname)         Arif (Given Name)         Eldar oglu (Middle Name)	<div style="text-align: center;"> <b>Pho</b>    <b>to</b> </div>
Rank Applied for:	3rd engineer	
Date of Application:	18.01.2024	
Direct Application:	<input type="checkbox"/> Yes <input type="checkbox"/> No (if No, indicate below the agency name)	
Agency Name:		
Availability:		

Basic Information			
Nationality	Azerbaijani	Mother Full Name	
Religion	Islam	Sector / Sub caste	
Date of Birth & Age	23.06.2001 ; 22	Place & Country Of Birth	Azerbaijan
Permanent Address	Azerbaijan,Baku		
Telephone Numbers		Mobile Number	+994(51)6303710
Email	zulalovarif496@gmail.com	Skype ID	
Marital Status(please mark)	<input type="checkbox"/> Married <input type="checkbox"/> <input checked="" type="checkbox"/> Single <input type="checkbox"/> Other:		
Next of kin / Relative to be contacted (in case of emergency)	Name: Eldar		Relation: Father
	Contact Details: +994(70)2183838		
Nearest International Airport, Country			
Passport Number	C02808630	Date Issued	27.06.2020
Country of Issue	Azerbaijan	Expiry Date	26.06.2030
Seaman Book Number	DQK 025965	Date Issued	06.12.2023
Country of Issue	Azerbaijan	Expiry Date	06.12.2028
PPE Details			
Boiler Suite Size	50	Safety Shoe Size	42
Certificate of Competency Details			

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Certificate Grade		Expiry Date	
Certificate Number		Country Of Issue	
STCW Regulation		Revalidation Date	
Endorsement Number		Expiry Date	

**GMDSS Certificate Details**

Certificate Number		Expiry Date	
Endorsement Number		Expiry Date	

**Flag Documents** *(If the document is available, provide the expiry date)*

	COC		Endorsement		Seaman's Book	
	Available	Expiry Date	Available	Expiry Date	Available	Expiry Date
<b>St. Vincent</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bahrain</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Panama</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Client Approval**


Do you have the valid document for the below? If yes, indicate the issue date.

1. ADNOC Approval    ☐ Yes    ☐ No    Issue Date: \_\_\_\_\_
2. ARAMCO Approval    ☐ Yes    ☐ No    Issue Date: \_\_\_\_\_


**STCW Certificate Details**

*All must be valid – If validity of certificate is not mentioned on the certificates, expiry dates to be considered as 3 years from date of issue of certificate.*

	Issue Date	Expiry Date	Issued At
Basic Safety Training	08.12.2023	07.12.2028	state maritime agency
Personal Survival Techniques	08.12.2023	07.12.2028	state maritime agency
Proficiency in Survival Crafts & Rescue Boats	11.05.2023	11.05.2028	STATE MARTIME AGENCY
Basic / Advanced Fire Fighting	08.12.2023	07.12.2028	state maritime agency
Basic First Aid / Medical Care / Medical First Aid	08.12.2023	07.12.2028	state maritime agency
Personal Safety & Social Responsibility	08.12.2023	07.12.2028	state maritime agency
Automatic Radar Plotting Aid [ARPA]			


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Radar Observer Course [ROC]			
Ships Security Awareness / Officer	27.11.2023	24.11.2028	state maritime agency
ECDIS			
Bridge/Engine resource management	16.06.2023	16.06.2028	state maritime agency
<b>Offshore Training Certificate Details</b>			
	<b>Issue Date</b>	<b>Expiry Date</b>	<b>Issued At</b>
Basic/Advanced Offshore Safety			
BOSIET - OPITO			
H2S - OPITO			
Safe Lifting			
Safety Welding			
With UAE Work Experience? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      If yes, From _____ to _____			
No. of Years in UAE:			
Type of Visa:			
Reference From Last Two Employers [All details are Mandatory]			
Company 1	Company Name (not the manning agents, must be Owners)		
Contact Person Name		Designation	
Contact Numbers		Country	
Company 2	Company Name (not the manning agents, must be Owners)		
Contact Person Name		Designation	
Contact Numbers		Country	

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Record of Sea Service													
(Recent Vessel/MOU First)													
Vessel Name	Company (Owners)	Rank	Type of Vessel	Propulsion type	Flag	Area of operation	GT	Type of Engine	BHP	Bollard Pull	Sign on Date (DD:MM:YYYY)	Sign of Date (DD:MM:YY)	Duration (Days : Month)
GENERAL ASADOV	ASCO	CADET	Passenger Ship	12-000							03.01.2020	21.02.2021	
Delfin-1	PERVİZ İKF	3rd eng	General cargo								11.03.2024	20.06.2024	
DELFIN	PERVİZ İKF	Oiler	General Cargo								04.07.2021	25.08.2021	
EUPHRATES	MIDDLE EAST AIR DRILLING SERVICE	Oiler	PSV DP2								15.09.2021	08.02.2022	
EUPHRATES	MIDDLE EAST AIR DRILLING SERVICE	Oiler	PSV DP2								29.03.2022	24.08.2022	
EUPHRATES	MIDDLE EAST AIR DRILLING SERVICE	Oiler	PSV DP2								04.11.2022	17.04.2023	
EUPHRATES	MIDDLE EAST AIR DRILLING SERVICE	Oiler	PSV DP2								08.07.2023	21.09.2023	

- **Note: Type of Engines & BHP: Mandatory for Engineers**

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*I hereby confirm that all the above furnished details are true.*


Name: \_\_\_\_\_

Rank: \_\_\_\_\_

Signature: \_\_\_\_\_

## EMPLOYMENT APPLICATION FORM

[illegible]

 <b>ZMi</b> <small>HOLDINGS ZANDER MARINE INTERNATIONAL</small>	<b>FLEET PERSONNEL MANUAL</b>	Document No.	FPP 03-01
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**Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_