



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position		identity card PIN Number 5UR8RAF
Position Applied for:	Chief Officer	
Date Available from:	-	

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Personal Information		Gender: Male
First Name: IBRAHIM	Last Name: SULEYMANOV	
Date of Birth: 27.11.1994	Place of Birth (City and Country): Azerbaijan, BAKU	
Email: ibrahimsuleymanov1903@gmail.com	Mobile Number: (+994) 55 630 30 03	
Permanent Address: Gara Garayev avenue, Nizami district, Baku, Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: -	
Person to call in emergency: (+994) 55 371 39 50 Father		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Tapdig	Suleymanov	Male	Father	+994553713950

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan Marine Academy	Azerbaijan	2011	2015	Bachelor

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Physical Data	
Height	182
Weight	77
Boilersuit Size	M-L
Shoes Size	42
Blood group	B(III)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

Ship Management
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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`s Book & Identify Docs

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 022616		01.02.2023	Azerbaijan		01.02.2028
Certificate of Competency	Azerbaijan	0006978		01.04.2024	Azerbaijan		01.04.2029
Republic of Azerbaijan	Azerbaijan	C3510964		15.02.2023	Azerbaijan		14.02.2033
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				-			

Professional Test

Professional Test Date	Name of Test	Score
-	-	-

License

Name	Issuing Country	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-0690-20	SMPA	14.06.2020	14.06.2025
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0690-20	SMPA	14.06.2020	14.06.2025
ELEMENTARY FIRST AID	Azerbaijan	SO-0690-20	SMPA	14.06.2020	14.06.2025
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0690-20	SMPA	14.06.2020	14.06.2025
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0690-20	SMPA	14.06.2020	14.06.2025
International Safety Management	Azerbaijan	SP-0104-23	SMPA	18.01.2023	17.01.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0181-23	SMPA	16.01.2023	16.01.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-0335-20	SMPA	08.06.2020	05.06.2025
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0279-20	SMPA	20.06.2020	20.06.2025
Ship Security Officer	Azerbaijan	SG-0362-23	SMPA	12.10.2023	12.10.2028
Leadership & Teamwork	Azerbaijan	DL-0536-24	SMPA	30.08.2024	30.08.2029
Advanced Training in Fire Fighting	Azerbaijan	SJ-0279-20	SMPA	06.07.2020	20.06.2025
Medical First Aid	Azerbaijan	SN-0811-24	SMPA	26.08.2024	
Medical Care	Azerbaijan	SM-0467-23	SMPA	30.10.2028	27.10.2028
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0272-20	SMPA	30.12.2020	10.12.2025
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SQ-0311-20	SMPA	23.12.2020	21.12.2025
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0218-20	SMPA	22.06.2020	20.06.2025
Bridge Resource Management	Azerbaijan	SV-0299-23	SMPA	22.09.2023	22.09.2028
Ship Handling and Maneuvering	Azerbaijan	SW-0353-20	SMPA	28.12.2020	28.12.2025

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Seagoing Experience

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

COMPANY	Name of vessel	Flag	Vessel's Type	DWT	Eng Type	GRT	TEU	Rank	From m/d/y	To m/d/y	Total m/d	REASONS FOR S/OFF
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	3 RD Officer	10.07.2019	25.09.2019	2 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	3 RD Officer	09.11.2019	22.12.2019	1 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	04.02.2020	18.03.2020	1 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	29.04.2020	12.06.2020	2 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	17.07.2020	25.08.2020	1 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	29.09.2020	17.11.2020	2 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	11.01.2021	22.03.2021	2 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	03.06.2022	15.11.2022	5 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	2 ND Officer	05.02.2023	31.05.2023	3 months	End of Contract
CASPIAN GEO	M/V GILAVAR	Azerbaijan	Research Vessel	1400	Bergen	3779	-	Chief Mate	05.04.2024	05.09.2024	5 months	End of Contract

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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: Good
 Azerbaijan Language: Good
 Turkish Language: Good
 Russian Language : Average

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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. CASPIAN GEO	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: 13.06.2024

Signature

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