



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

1

Position	identity card PIN Number 57HQS59
Position Applied for:	Second Engineer
Date Available from:	-

2

Personal Information	Gender: Male
First Name: FARID	Last Name: ABGULOV
Date of Birth: 10.11.1991	Place of Birth (City and Country): Azerbaijan, GUSAR
Email: Farid.abugulov@mail.ru	Mobile Number: (+994) 51 580 36 97
Permanent Address: Girik village, Gusar district, Azerbaijan	Expected Salary Per Month: 5500\$
Nationality: Azerbaijan	Alternative rank applying for:-
Person to call in emergency: (+994) 50 394 18 85 Father	

3

Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Atfulla	Abgulov	Male	Father	+99450394185

4

Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	2012	2016	Bachelor

5

Physical Data	
Height	160
Weight	81
Boilersuit Size	48
Shoes Size	40
Blood group	O(I)RH+
Additional Physical Information: {You can write any other information you want to add about your physique in this field.}	

6

Seaman'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 026487		19.01.2024	Azerbaijan		19.01.2029
Certificate of Competency	Azerbaijan	0006760		18.03.2022	Azerbaijan		18.03.2027
Republic of Azerbaijan	Azerbaijan	C02189830		27.09.2018	Azerbaijan		26.09.2028
Seaman Book	Panama	PA0343072		11.01.2023	Panama		28.03.2027
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				-			

7

Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8

License

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

9

STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-2733-21	SMPA	18.10.2021	07.10.2026
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-2733-21	SMPA	18.10.2021	07.10.2026
ELEMENTARY FIRST AID	Azerbaijan	SO-2733-21	SMPA	18.10.2021	07.10.2026
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-2733-21	SMPA	18.10.2021	07.10.2026
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-2733-21	SMPA	18.10.2021	07.10.2026
International Safety Management	Azerbaijan	SP-1341-23	SMPA	26.04.2023	20.04.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1208-23	SMPA	06.04.2023	05.04.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-3396-24	SMPA	21.08.2024	Unlimited
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0861-22	SMPA	17.05.2022	17.05.2027
Dangerous , hazardous and harmful cargoes	Azerbaijan	SK-0650-24	SMPA	22.08.2024	19.08.2029
Leadership & Teamwork	Azerbaijan	DL-0818-22	SMPA	24.05.2022	24.05.2027
Advanced Training in Fire Fighting	Azerbaijan	SJ-0433-21	SMPA	04.06.2021	04.06.2026
Medical First Aid	Azerbaijan	SN-0575-23	SMPA	12.04.2023	06.04.2028
Medical Care	Azerbaijan	ER-0313-22	SMPA	12.05.2022	12.05.2027
1000v	Azerbaijan	DM-0173-24	SMPA	23.08.2024	23.08.2029

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

[illegible]

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11

For Engineers (Please provide details)

Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

12

Other Experience

Russian Language: Good
Azerbaijan Language : Good

12

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	-

13

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)

14

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)

15

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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16

References *(Please give the name and address of your current or immediate past employer)*

Name of company	1.-	2.-
Name of person to contact	-	-
Address	-	-
☎ No.	-	-

17

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: 17.09.2024

Signature

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