



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position		identity card PIN Number 3B05KZ4
Position Applied for:	Chief Engineer	
Date Available from:	-	

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Personal Information		Gender: Male
First Name: SABUHI	Last Name: SALAHOV	
Date of Birth: 21.02.1977	Place of Birth (City and Country): Azerbaijan, UJAR	
Email: Salahovsabuhi1@gmail.com	Mobile Number: (+994) 51 581 01 31	
Permanent Address: Malikballi village , Ujar district , Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: -	
Person to call in emergency: (+994) 70 625 67 16 Brother		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
-	-	Male	Brother	+994 70 625 67 16

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Volga State University of Water Transport	Russia	2012	2016	Bachelor

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Physical Data	
Height	170
Weight	90
Boilersuit Size	XXL
Shoes Size	42
Blood group	A(II)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

Ship Management
ISM&ISPS Management
Ship Agency
Consultations
Provision, Ship Supply

Yacht Management
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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

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Seaman`s Book & Identify Docs

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 018332		04.09.2021	Azerbaijan		04.09.2026
Certificate of Competency	Azerbaijan	0003095		16.04.2024	Azerbaijan		13.03.2029
Republic of Azerbaijan	Azerbaijan	C03957461		08.08.2022	Azerbaijan		07.08.2032
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	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

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STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-2586-22	SMPA	08.06.2022	08.06.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-2586-22	SMPA	08.06.2022	08.06.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-2586-22	SMPA	08.06.2022	08.06.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-2586-22	SMPA	08.06.2022	08.06.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-2586-22	SMPA	08.06.2022	08.06.2027
International Safety Management	Azerbaijan	SP-0555-22	SMPA	04.03.2022	03.03.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2473-22	SMPA	24.08.2022	24.08.2027
Security Awareness Training For All Seafarers	Azerbaijan	-	SMPA	-	-
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0300-22	SMPA	04.03.2022	24.02.2027
Proficiency in Fast Rescue Boats	Azerbaijan	SU-0186-22	SMPA		
Leadership & Teamwork	Azerbaijan	DL-1333-22	SMPA	19.08.2022	19.08.2027
Advanced Training in Fire Fighting	Azerbaijan	SJ-1486-22	SMPA	14.10.2022	14.10.2027
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0748-23	SMPA	-	-
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	-	SMPA	-	-
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan	-	SMPA	-	-
Medical First Aid	Azerbaijan	SN-0966-22	SMPA	11.08.2022	11.08.2027
Updating	Azerbaijan	XS-0100-24	SMPA	13.03.2024	13.03.2029
Eugenie-room resource management	Azerbaijan	ER-0269-22	SMPA	22.04.2022	22.04.2027
1000v	Azerbaijan	DM-0202-23	SMPA	09.08.2023	09.08.2028

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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
ASCO	M/V NARVA	Russia	General Cargo Ship	2649	-	1926	-	Chief Engineer	16.12.2023	01.05.2024		End of Contract
ASCO	M/V STB-1	Azerbaijan	General Cargo Ship	2336 4	-	7009	-	Chief Engineer	01.03.2022	15.12.2023		End of Contract
ASCO	M/V NARVA	Russia	General Cargo Ship	2649	-	1926	-	Chief Engineer	01.10.2021	28.02.2022		End of Contract
ASCO	M/V NARVA	Russia	General Cargo Ship	2649	-	1926	-	Chief Engineer	02.04.2021	30.09.2021		End of Contract
ASCO	M/V GENERAL SHIKLINISKI	Azerbaijan	Crane Ship	1981 3	-	3343	-	Chief Engineer	18.10.2020	07.03.2021		End of Contract
ASCO	M/V TURKHAN	Azerbaijan	Multi Purpose	1830	-	1763	-	Chief Engineer	23.03.2020	19.09.2020		End of Contract
ASCO	M/V SHAIR SABIR	Azerbaijan	General Cargo Ship	5509	-	4182	-	Chief Engineer	14.05.2019	28.01.2020		End of Contract
ASCO	M/V ORDUBAD	Azerbaijan	General Cargo Ship	1145 0	-	3950	-	Chief Engineer	21.08.2018	16.03.2019		End of Contract
ASCO	M/V SIRVAN-2	Azerbaijan	Crane Ship	1326	-	2971	-	Chief Engineer	16.11.2016	30.06.2018		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

-

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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.-	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: 29.04.2029

Signature

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