CURRICULUMVITAE MALINDA	3	OF MR. MOHAMED SAID
Names	:	Mr. Mohamed said malinda
Rank	:	AB
Place/Date of Birth	:	ILALA CBD
Address	:	MBAGALA- DAR ES SALAAM
Mobile Phone/Home	:	+255711747161, OR whatsapp +971565851678,
Email	:	Mohamedsaid588108@yahoo.com
Nationality	:	TANZANIAN
Marital Status	:	SINGLE
Professional Education	:	MARINE NAVIGATIONAL
Height/Weight	:	177/60

Next of Kin/Emergency Contact					
Name	:	ZABIBU SWEDY			
Permanent Address	:	MBAGALA- DAR ES SALAAM			
Phone/ Home	:	+255719807424			
Relation	:	MOTHER			

Travel Document	Number	Authority /Government	Issued Date	Expire Date
Passport	TAE516742	PCO –DAR ES SALAAM	30/09/2022	29/09/2032
Seaman book	DB 04985	TASAC – TANZANIA	09/06/2022	08/06/2027
Covi-19 Vaccination	IVD00024868714	TANZANIA	03/04/2023 28/04/2023	NIL

Watch keeping Certificates	Number	Authority /Government	Issued Date	Expire Date
Rating forming part of a Navigational Watch	09715	Tasac – Tanzania	07/04/2022	NIL
Able seafarer Deck	07384	Tasac – Tanzania	04/04/2022	NIL

Certificate of STCW78/2010	Number	Authority /Government	Issued Date	Expire Date

Personal Survival Technique	011166	Tasac – Tanzania	14/04/2022	13/04/2027
Fire Prevention and Fire Fighting	0901 7	Tasac – Tanzania	25/03/2022	24/03/2027
Personal Safety and Social Responsibility	09838	Tasac – Tanzania	01/04/2022	30/03/2027
Elementary First Aid	01764	Tasac – Tanzania	01/04/2022	30/03/2027
Security Awareness Training	09471	Tasac – Tanzania	25/03/2022	NIL
Seafarer Designated Security Duties	04733	Tasac – Tanzania	12/04/2022	NIL
Proficiency in Survival Craft and Rescue Boats	04259	Tasac – Tanzania	07/04/2022	06/04/2027
Hydrogen Sulphide Safety	7645	DMI-Tanzania	20/04/2022	19/04/2027

#### SEA SERVICE RECORDS FOR THE LAST

0	VESSEL NAME	RANK	TYPE OF VESSEL	GRT/HP	SIGNING ON DA TE	SIGNI NG OFF DATE	ION	COMPANY/ CONTR ACTOR	TRADING AREA
1	NORMAND ARCTIC	AB	TUG SUPPLY	5280	15/03/2019	01/10/2019	06 Months	NORWAGIA N OCEAN	OFFSHORE
2	BGSM PRIDE	AB	TUG SUPPLY	2586	03/01/2020	29/07/2020	07Months	BGSM PRIDE	OFFSHORE
3	BGSM PRIDE	AB	TUG SUPPLY	2586	04/11/2020	13/06/2021	07 Months	BGSM PRIDE	OFFSHORE
4	AOS PROVIDER	AB	AHTS	1537	05/09/2021	28/01/2022	05 Months	PANAMA	OFFSHORE
5	CSC NELSON AVATU	AB	AHTS	6800	20/02/2022	23/07/2022	06 Months	CSC	OFFSHORE
	CSC NELSON AVATU	AB	AHTS	6800	01/09/2022	29/10/2023	14 Months	CSC	OFFSHORE



## DB 04985

THIS BOOK IS A SEAFARER'S IDENTITY DOCUMENT ISSUED FOR THE PURPOSE OF PROVIDING THE HOLDER WITH IDENTITY PAPERS FOR TRAVEL TO OR FROM AN ASSIGNED VESSEL OR PURSUANT TO INSTRUCTIONS BY THE MASTER OF SUCH A VESSEL, AND PROVIDING A RECORD OF THE HOLDER'S SEAGOING SERVICE.

THIS BOOK IS NOT A PASSPORT AND IT IS ISSUED WITHOUT PREJUDICE TO AND IN NO WAY AFFECTS THE NATIONAL STATUS OF THE HOLDER.

THE SPECIAL QUALIFICATION CERTIFICATES ENTERED WITHIN THIS BOOK ARE ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE INTERNATIONAL CONVENTION ON THE STANDARDS OF TRAINING, CERTIFICATION AND WATCHKEEPING, 1978 AS AMENDED AND OTHER RELEVANT CONVENTIONS RATIFIED BY THE UNITED REPUBLIC OF TANZANIA



#### UNITED REPUBLIC OF TANZANIA

SURFACE AND MARINE.TRANSPORT REGULATORY AUTHORITY

THIS SEAFARER'S IDENTITY DOCUMENT AND RECORD BOOK IS ISSUED TO

MOHAMED SAID MALINDA

UNDER THE PROVISIONS OF SECTION 117 OF THE MERCHANT SHIPPING ACT, 2003

Signature of Issuing Officer

Designation of Issuing Officer

REGISTRAR OF SEAFARERS
TANZANIA

THIS BOOK COUNTAINS 32 NUMBERED PAGES
EXCLUSIVE OF COVERS

PAGE 1

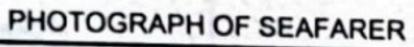


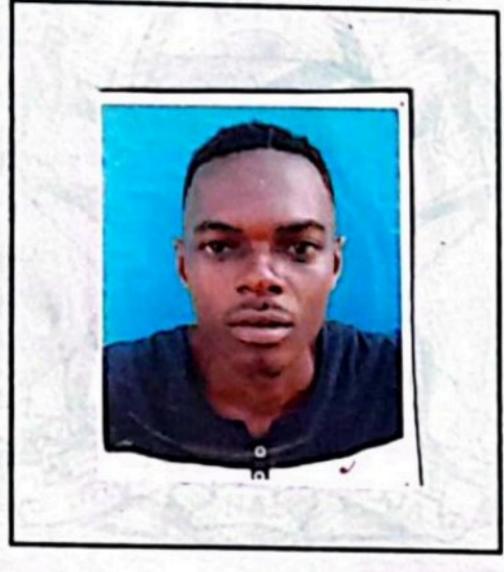
PAGE 3

SURNAME MALINDA OTHER NAMES MACHAME			
DATE OF BIRTH	PLACE OF BIRTH		
COLOUR OF EYES BLACK	HEIGHT 177 CM	WEIGHT 52KG	SEX
COLOUR OF HAIR BLACK	DATE OF EXPIRY	JUN 2027	1
DISTINGUISHING MARKS			
DATE OF ISSUE	PLACE OF ISSUE TASAC HQ-DA	R ES SAI A	ΔM

PAGE 2

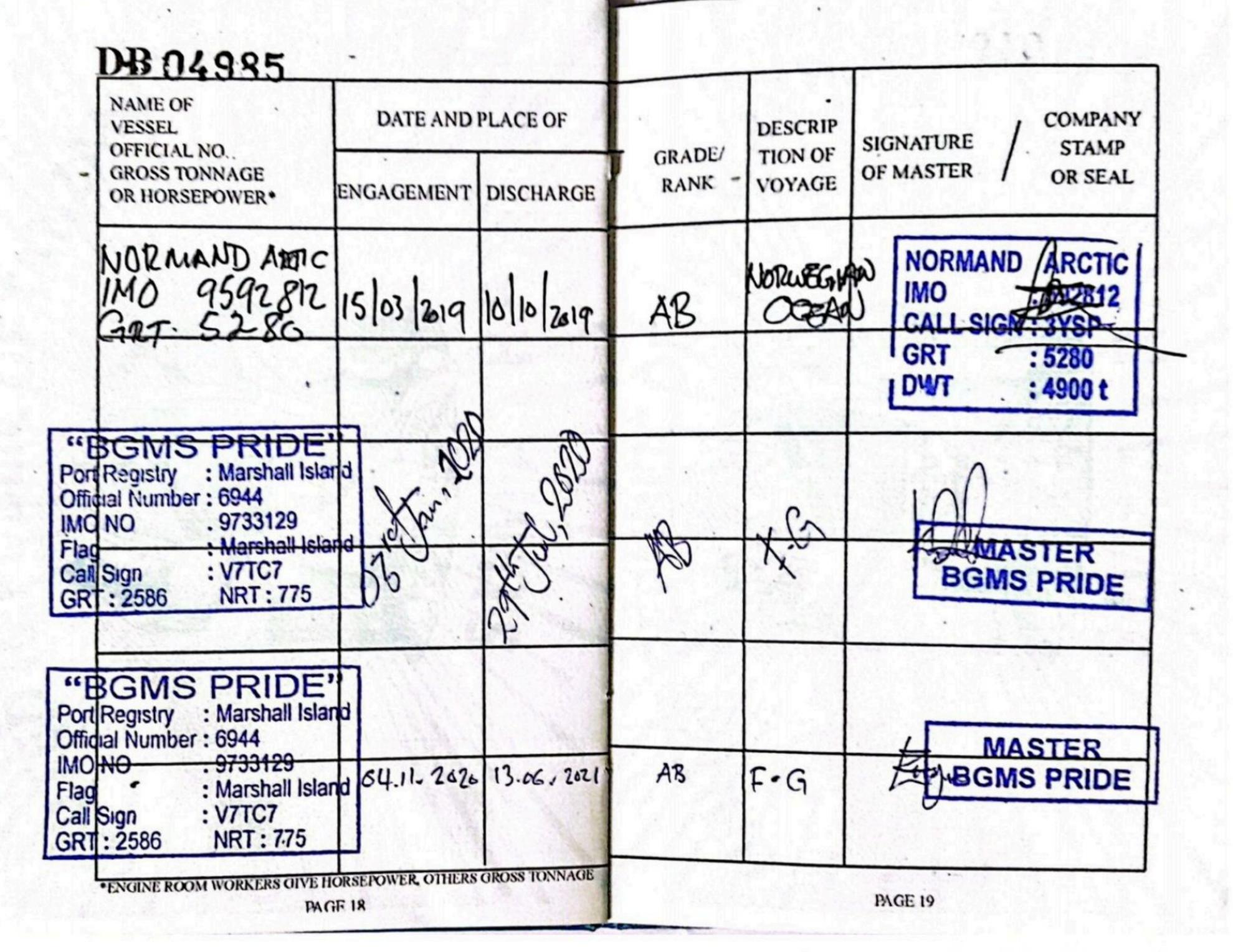




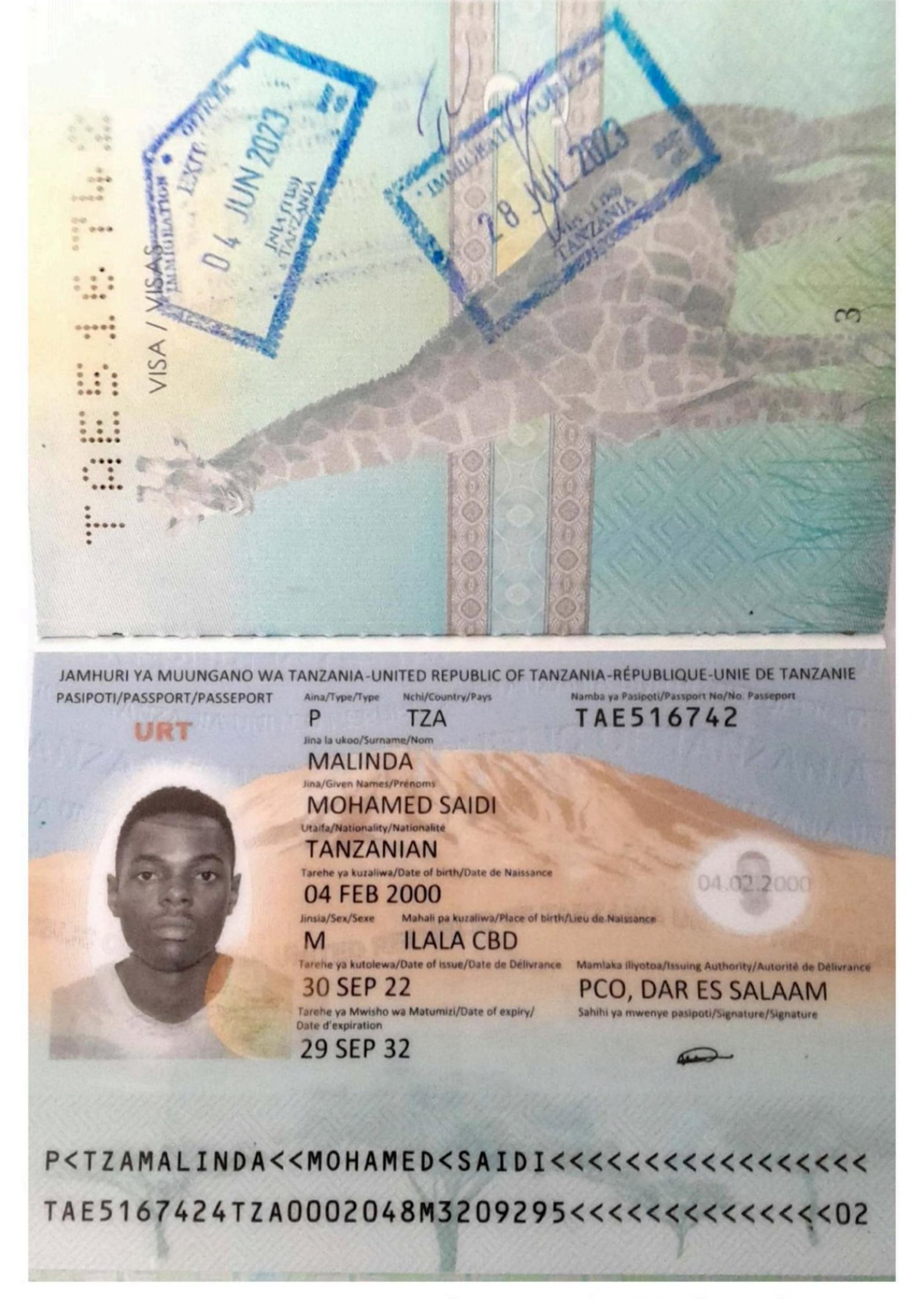




SIGNATURE OF SEAFARER



VESSEL OFFICIAL NO	DATE AND	PLACE OF		DESCRIP	SIGNATURE / COMPANY
- GROSS TONNAGE	ENGAGEMENT	DISCHARGE	GRADE/ RANK -	TION OF VOYAGE	OF MASTER OR SEAL
GRT: 1537 PO CALL SIGN:NO:6399	05/09/2021	28/11/2022	#8	OFFISHER	PROVIDER GRT: 1537 R CALL SIGN:NO:6399
PANAMA					PANAMA
CSC NELSON AVATU	120-08-505	23.07.22	AB.	OFFISHORE	SS NELSON NELSON OFF NO: 2086
OF NO: 2086 CALL SIGN: BZ25289 IMO NO: 752561 GRT /NRT:6800/2000	Merribaca	Monteaga			IMO NO: 752561 GRT /NRT:6800/2000
SC NELSON AVATU	01-8-2022	29-10.23			CSC NELSON OFMNO: 2086
AL_SIGN: BZ25289 MO NO: 752561 RT/NRT:6800/2000	MOMBAGH	MOMBASA	AZ	OFFICHUR	GALL SIGN: BZ25289 IMO NO: 752561 GRT /NRT:6800/2000







# THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPING AGENCIES CORPORATION TASAC



This is to certify that.	MR.	MC	HAMED	SAID	MALINDA
Date of birth 04.02	2.200	0	Place of t	irth	ILALA

Has successful completed an approved ABLE SEAFARER DECK course. This Certificate has been issued under Regulation II/5 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW), 1978 as amended [2010].

Issued on 01.04.2022

Signature of the Holder



Cof. E.E.MARIJANI

Name and Signature of duly Authorised Officer



#### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC



This is to certify	MR. MOHAN	MED SAID	
	0.4.02.2000 Place		
TECHNIQUES Regulation VI/1 Certification and	y completed an appro- course. This Certific of the International Con- Watchkeeping for Seaf A-VI/I and Table A-VI/I	vention on Stand farers (STCW) 1	ards of Training, 978 as amended
Issued on	4.04.2022 Valid U	13	.04.2027
	ature of the Holder		

Copt. E. E- MARCIAN 1 -2
Name and Signature of duly Authorised Officer





## THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC

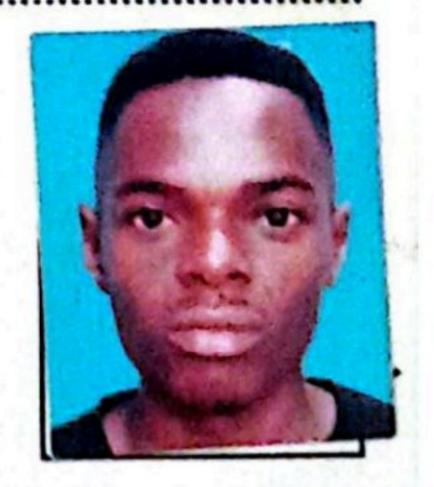


	MR.	MOHAMED	SAID	MALINDA	
This is to certi	fy that		•••••	······	•
				ILALA	
Date of birth	04.02.200	OOPlace of b	oirth		•

Has successfully completed an approved FIRE PREVENTION AND FIRE FIGHTING course. This Certificate has been issued under Regulation VI/1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010], Section A-VI/1 and Table A-VI/1-2 of the STCW Code.

25.03.2022 24.03.2027 Issued on......Valid Until.....

Signature of the Holder



Cept. E. E. MARIJANI

Name and Signature of duly Authorised Officer





#### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC



MR. MOHAMED SAID This is to certify that	MALINDA
Date of birth. 0.4.02. 2000 Place of birth	
Has successfully completed an approved <b>ELEMEN</b> 's course. This Certificate has been issued under Registremational Convention on Standards of Training Watchkeeping for Seafarers (STCW) 1978 as amend A-VI/1 and Table A-VI/1-3 of the STCW Code.	ulation VI/1 of the Certification and
01.04.2022 Issued onValid Until	30.03.2027
Signature of the Holder	

F. E. MARUJANI

Name and Signature of duly Authorised Officer



#### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC



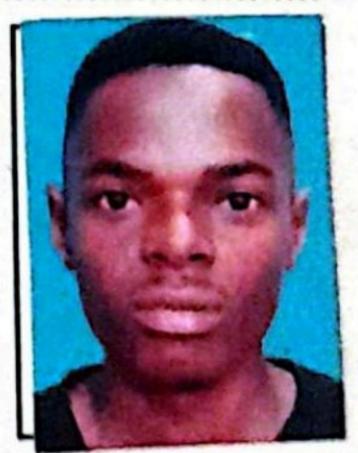
This is to certif	MR. y that	MOHAMED	SAID	MALINDA	
Date of birth					

Has successfully completed an approved SECURITY AWARENESS TRAINING course. This Certificate has been issued under Regulation VI/6.1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

25.03.2022

Issued on

Signature of the Holder



Oft. E. HARIJAWI

Name and Signature of duly Authorised Officer





#### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPING AGENCIES CORPORATION TASAC



This is to certify that	MR.	MOHAMED	SAID	MALINDA

Date of birth. 04.02.2000 Place of birth..

Has successful completed an approved PROFICIENCY IN SURVIVAL CRAFT & RESCUE BOATS course. This Certificate has been issued under Regulation VI/2-1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

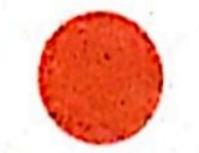
Issued on. 07.04.2022 Valid Until.... 06.04.2027

Signature of the Holder



E.E.MARIJANI

Name and Signature of duly Authorised Officer





#### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC

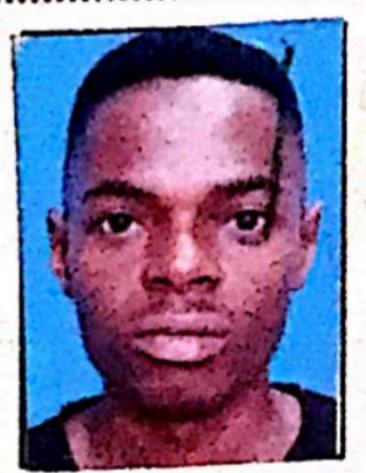


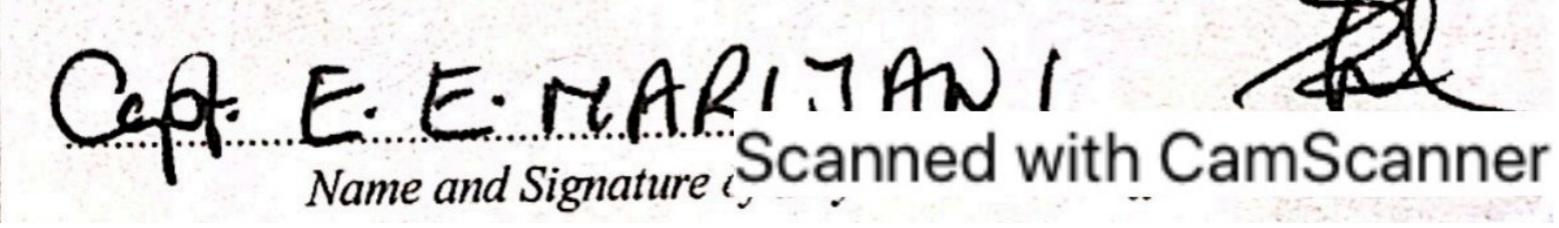
				MALINDA	
This is to certify	that				
Date of birth	04.02.20	000 Place of b	oirth	LALA	

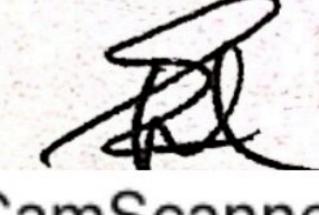
Has successfully completed an approved PERSONAL SAFETY AND SOCIAL RESPONSIBILITIES course. This Certificate has been issued under Regulation VI/1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010], Section A-VI/1 and Table A-VI/1-4 of the STCW Code.

30.03.2027 01.04.2022 .....Valid Until..... Issued on...

· Signature of the Holder











### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPING AGENCIES CORPORATION TASAC



This is to certify that	MR.I	MOHAMED	SAID	MALINDA
- mid to coltiny diat				

Date of birth. 04.02.2000 Place of birth. ILALA

Has successful completed an approved SEAFARER DESIGNATED SECURITY DUTIES course. This Certificate has been issued under Regulation VI/6.4 of the International Convention on the Standards of Training Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

12.04.2022 Issued on.

Signature of the Holder



GA. E. E. MARIJANI Sonature (Scanned with CamScanner

## DAR ES SALAAM MARITIME INSTITUTE (DMI)

Dar es Salaam Maritime Institute (DMI) P.O.BoX 6727 Dar es Salaam

Tanzania

TNo: 027576



Tel: + 255 22 2133645 Fax: + 255 22 211 2600 Email: dmi83@hotmail.com Website: www.dmi.act.tz

Registered Government Training Institute
Accredited by the Surface and Marine Transport Regulation Authority

#### Student Number DMI/HSS/26/02/024

This is certify that



#### MOHAMED SAID MALINDA

Holder of DB 04985 and Passport No.TAE 516742 Has successfully Completed a training course for

#### **HYDROGEN SULPHIDE SAFETY**

This course covers the following topics

- Introduction, Hazards & Characteristics
- Method of Detection (Old & New) precaution location safety & protection
   (a) Modern way to reduce concentration of H2S on the drill floor
- Function of CMS, SCBA and various protective Equipments
- Contingency Plans
- Response, procedure, procedure form Marks, sign
- First Aid, Responsibility (Employers, workers)

Signature of Course Coordinator Signature of the Candidate

26<sup>th</sup> February, 2024
Date of Issue

25<sup>th</sup> February, 2026 Expire Date





#### THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPING AGENCIES CORPORATION TASAC



This is to certify that MR. MOHAMED SAID MALINDA
--

Date of birth 04.02.2000 Place of birth... ILALA

Has successful completed an approved RATING FORMING PART OF A NAVIGATIONAL WATCH course. This Certificate has been issued under Regulation II/4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

07.04.2022 Issued on.

Signature of the Holder



Coff E. E. MARIJANI

Name and Signature of Scanned with CamScanner



## THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS, TRANSPORT AND COMMUNICATION TANZANIA SHIPPING AGENCIES CORPORATION TASAC



Medical Fitness Certificate	
Name MALIMDA MOHAMED SAID	
Gender: Male Female Date of birth (day/month/year). 04, 02, 20	00
Home address MAHAYLA ILMENT DAY EL JOHNAM	
Proof of identity: Kind of identity PASSPORT Number 1AE516742	
I have evaluated the above named applicant according to the Merchant Shipping (Medical Examinations) Regular made under the Merchant Shipping Act, 2003. On the basis of the applicant's personal declaration, my clinical earn diagnostic test results recorded on the medical examination form, I declare the applicant fit for seafaring	
FITFOR SEAFARING	
The applicant used aids to vision to meet a satisfactory standard YesNo	
Date of last colour vision test if not tested at this examination	
The applicant used aids to hearing to meet a satisfactory standardYesNo	
Date of examination 27,02, 2024(Day/month/year) Place of examination. DAR ES SALAMM	
Name of Approved Medical Practitioner  Signature of Approved Medical Practitioner  Signature of Approved Medical Practitioner.  Place of examination.  Place of examination.  Official Stamp	and the state of
Name of Approved Medical Practitioner	
Expiry date of Certificate	Ë/M
I acknowledge that I have been advised on the content of the medical examination form MEDICAL CLINIC	0
Applicant's signature	
The original of this Certificate is given to the applicant and another copy to be provided to FASA ESTATE Appro	ved M
Practitioner may retain a copy.  • General Physician • Aviation Medical Examiner (AME) • Seafarers Medical Services (TASAC)	
o Sealmers Medical Services (Morio)	

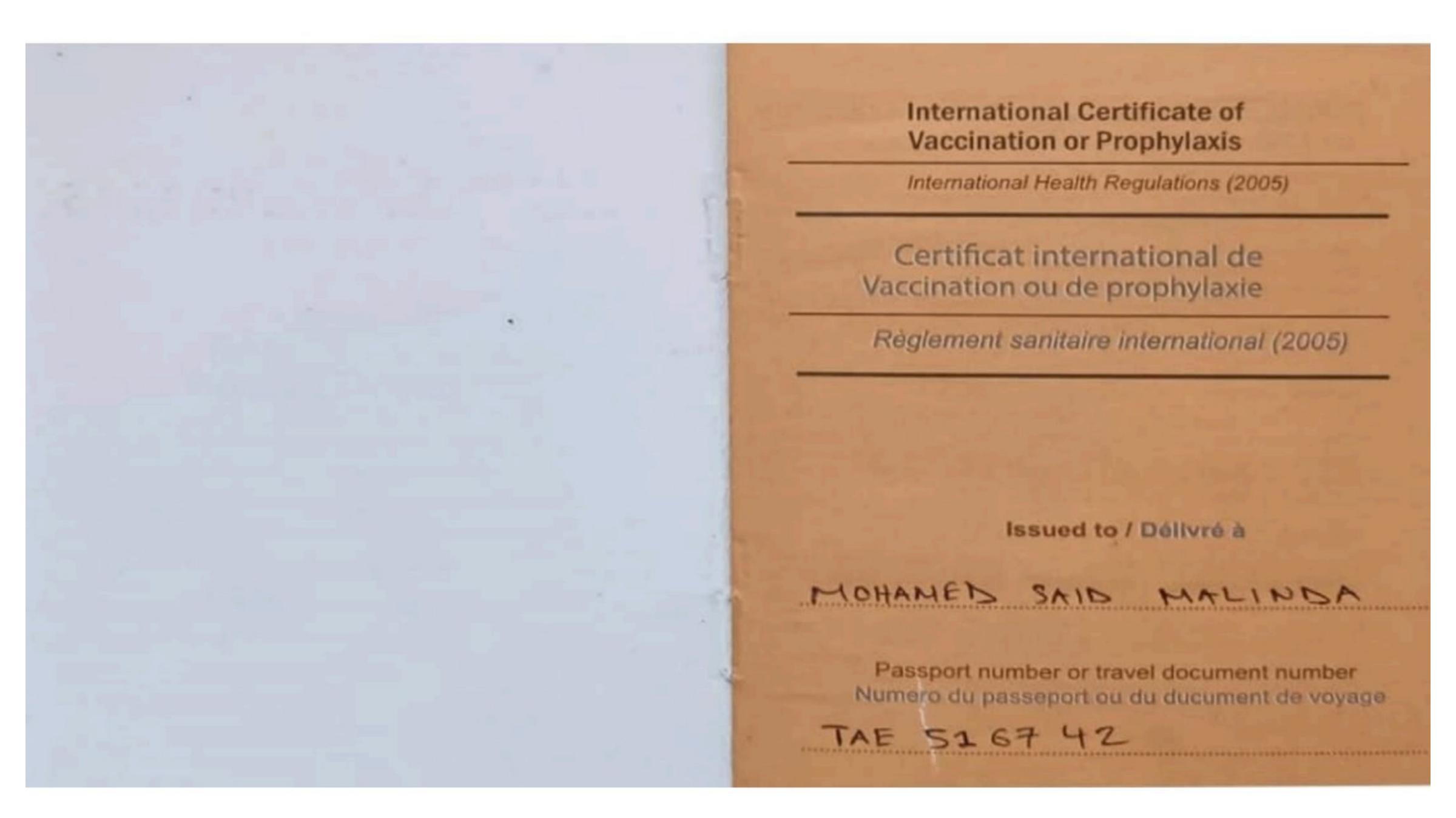
Please complete this questionnaire prior to attendance, but leave blank the answer to any question you do not under You must bring a suitable means of identification (passport, certificate of competence, driving license) with you examination.



### EDEN MEDICAL CLIMIC

P.O. BOX 65202, TEL. 0713-321426 DAR ES SALAAM

Card Not	Requested by De 67.17.0
Diagnosis: NONE	Speciment: 2
Clinical Findings-	1275
- ½ · · ·	ON REQUESTED
Random blood glucose:	Urinalysis/ Urina
Fasting blood glucose:	Urobilinogen:
HB Level:	Glucose:
ABO Blood Grouping:	Billrubin:
HIV Test NEGOTIVE	Ketones:
UPT:	S.Gravity: 1.020
WEIGHT:	Blood:
HEIGHT	Protein:
Visual Acuity (VISION)	PH7-35
Speech/HEARING & Balance:	Nitrate:
Blood Pressure: 127/7/ Munth	Leukocytes:
Pulse Rate: 60/mm	MACR. Wellowish colour stace
Chest X-Ray-PA	MICR.
ECG: ElectroCardiogram	EDEN MEDICAL CLINIC
Date: 6/5/2022 DIR NO	P.O. Hox 65202, Dar es Salaam





### UNITED REPUBLIC OF TANZANIA



#### MINISTRY OF HEALTH

#### **CERTIFICATE OF COVID-19 VACCINATION**

Mohamed Said Malinda Full Name

IVD00024868714 Ref Number

TAE516742 ID Number

Feb 4, 2000 Date of Birth

Vaccin e Name	Batch Numbe r	Doses Admini stered	Date of Vaccination	Center of Vaccination
Sinoph arm BBI BP	202111 B4100	1st D ose	Apr 3, 2023	MNAZI MMOJA Dis trict Hospital
Sinoph arm BBI BP	202111 B4100	2nd Dose	Apr 28, 2023	MNAZI MMOJA Dis trict Hospital

Scan to validate



Statedaylo

ISSUED BY: Dr. Seif Shekalaghe

**Permanent Secretary** 

Please keep this card, it contains important information regarding the COVI
D-19 vaccine you have received

