APPLICATION FORM



Cityofliving PhoneNumbers

Per	8 A s		2								
Position Ap	pplied for:	OILER				Da	ate Avai	lab	ole from:	ANY TI	ME
1. PersonalD	ata										
Family Name PASHAYEV	e.	First Name:				Midd RAM	lle Name: IIL				
Date of Birth:	: 23.04.2004	Place of Birth: RI	USS	IAN	DAGES						
Permanent Ad DAGESTAN		SIAN, region.F	EL	DERATION	N	Phone	•	/ M	obile): <mark>+994</mark> esh04@gma		E
2. MaritimeH	Education										
Nameofs		Country		Town From			То			f degree or diple	oma
AZERBA IST.SER	•	AZERBAIJAN		BAKU	12.01	1.2024	12.07.20)24	6 Month		
3. Profession											
EnglishTestDate			N	ameofTest			Score				
ProfessionalTest	tDate		N	NameofTest			Score	Score			
ProfessionalInte	rviewDate		R	esult							
4. FamilyDet	toile										
		d, Divorced, Widowed	1): 5	SINGLE							
Next of Kin (the fir	est emergency cont	act):					Relation	nshij	p / my number		
Address of Residence	ce: AZERBAIJAN	I,					Phone:	+9	99450972381	0	
							I				
	Doughter	Son									
FamilyName											
FirstName											
DateofBirth											

5. IdentityDocuments						
Document	Country	Number	PlaceofIssue	IssueDate	ExpiryDate	
Seaman'sBook	AZERBAIJAN	AZE034503	State Maritime Administration	03.09.2024	03.09.2029	
TravelPassport	AZERBAIJAN	C03425877	AZERBAIJAN	29.05.2024	28.05.2034	

6. ValidVisa				
CountryorUnion	Type	ValidUntil		

7. Courses Attended and Certificates Obtain		D	ates	Di
Document	Number	Issue	Expiry	- Place
CertificateofCompetency	RP15833	26.08.2024		State Maritime Administrati
MalteseEndorsementof COC				
OilTankerEndorsement				
ChemicalTankerEndorsement				
GasTankerEndorsement				
Advanced training for oil tanker cargo operations				
ChemicalTankerFamiliarizationTraining				
GasTankerFamiliarizationTraining				
OilTankersSpecializedTraining				
ChemicalTankerSpecializedTraining				
GasTankerSpecializedTraining				
BasicTrainings	SO-2377-24	24.06.2024	29.05.2029	State Maritime Administrati on
Proficiency in Survival Craft and Rescue Boats	SL-2110-24	28.06.2024	11.06.2029	State Maritime Administrati on
AdvancedFireFighting				
MedicalFirstAidTraining				
Medical First Aid Training and Medical Care				
RO-ro				
Crisis management and human behavior training				
RadarObservation&Plotting				
Automatic Radar Plotting Aids Simulator (ARPA)				
BridgeTeamManagement				
Shiphandling&Maneuvering				
Ship Security-related familiarization security-awa	SI-2419-24	06.06.2024		State Maritime Administrati
reness training	51-2417-24	00.00.2024		on
MalteseEndorsementof SSO				
ISM Code	SP-2530-24	07.08.2024	30.05.2029	State Maritime Administ ration
SafetyOfficer				
ECDISTrainingCourse				
RiskAssessmentCourse				
C.O.W./ I.G.S				
FirePracticeonTankers				
WELDER(Elektrod-MMA)				
UnmannedMachinerySpace				
FRAMO FamiliarizationCourse				
Cargo Ballast Operations on Oil/Chemical Tanker s				
Engine resoursce management				
Leadership and Teamwork				
High woltage				
Risk Management And Incident Investigation				
Training of seafarers with designated security duti	SH-2083-24	05.07.2024		State Maritime Administrati
es	311-2003-24	05.07.2024		on
Dangerous hazardous and harmfull cargoes				
BasicTraining and qualifications on oil and chemic				
al tanker cargo operations]	

178	
75	
Black	
Chestnut	
42	
XL	
	75 Black Chestnut 42

9. MedicalHistory	Yes	No
Have you ever signed off a ship due to medical reasons?		+
Did you undergo any medical operation in the past?		+
Have you consulted a doctor during the last 12 months for an illness/accident?		+
Do you have any health or disability problems now?		+

If yes, please give full details:

	Passed:	Validtill:
InternationalMedicalExamination	10.11.2023	10.11.2025
VaccinationAgainstYellowFiver		
VaccinationAgainstDiphtheria		

10. References (please give name and address of your current or past em	ployer) Officeremarks
NameofCompany	
Name of person to contact	
Address	
Phone	
NameofCompany	
Name of person to contact	
Address	
Phone	

11. Bankaddressforallotr	ents
Beneficiary	
AccountNo.	
NameofBank	
BankAddress	

12. Knowledgeandexperience	Yes	No
OCIMF vettingexperience:		
ISGOT knowledge:		

13. I hereby declare that the above, including Medical History, is true				
Place				

14. ForOfficeuseonly	y
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15. SeagoingExperience

Nameofves sel	Flag	Vessel 's Ty pe	DW T	EngTy pe	НР	Manageror Owner	Rank	From d/ m/y	To d/m/	Tota l m/d
MORNOVA	AZE	Dry cargo	2500	Wartsila 6L20		Azerbaijan c ompany	cadet	12.04.2024	12.07.2024	3 month

Total rank sea service:

Total type of vessel sea service:

Rank	Years	Typeofvessel	Years				
		OIL TANKER					
		LPG					
		DRY CARGO					
		TANKER ICE					
		OIL /CHEMICAL TANKE					
		R					
		FERRY					
Total		Total:					