CURRICULUM VITAE OF MR, MOHAMMED SAID ABDULLAH

Names	:	
		MR. MOHAMMED SAID ABDULLAH
Rank	:	
		AB
Place / Date of Birth	:	
		ZANZIBAR,MJINI/06.9.2003
Address	:	ZANZIBAR
mobile Phone/Home	:	 +255 774 582 076
		1233 774 302 070
Email	:	medygrapher@gmail.com
Nationality	:	Tanzanian
Marital Status	:	Single
Professional Education	:	AB
Height / Weight	:	Height 180cm, Weight: 67Kgs



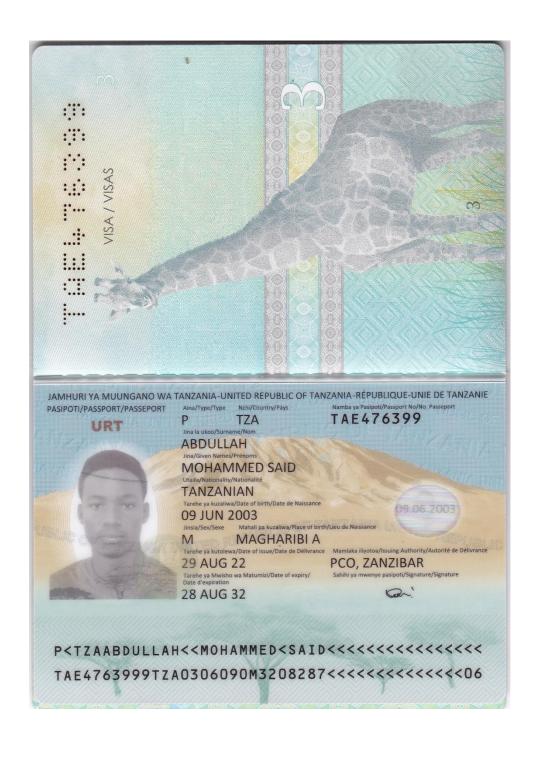
Travel Document	Number	Authority/Government	Issued Date	Expiry Date
Passport	TAE476399	PCO-ZANZIBAR	29.08.2022	28.08.2032
Seaman Book	ZMA-SDB-220065	TASAC-ZANZIBAR	26.01.2022	26.01.2027
Seaman Book	N ⁰ G23A8955	ST.VINCENT AND THE GRENADINES	25.09.2023	
Medical Fitness Certificate	NIL	TASAC	16.04.2024	15/04/2026
COVID 19	8003033	UNITED REPUBLIC OF TANZANIA	02.12.2022	NIL
YELLOW FEVER	151505	UNITED REPUBLIC OF TANZANIA	27.07.2023	NIL

Travel Document	Number	Authority/Government	Issued Date	Expiry Date
Old seaman book	000293	PCO - ZANZIBAR	01.03.2019	29.02.2024

CERTIFICATE OF STCW as amended 2010	Authority/Government	Issued Date	Expiry Date
Personal Survival Technique (PST)	TASAC-Tanzania	010549	16.12.2027
Proficiency in Survival Craft and Rescue Boat (PSCRB)	TASAC-Tanzania	011284	09.08.2027
Fire Prevention & Fire Fighting(FPFF)	TASAC-Tanzania	07954	16.12.2026
Elementary first aid(EFA)	TASAC-Tanzania	08896	16.12.2026
Personal Safety & Social Responsibility (PSSR)	TASAC-Tanzania	06134	04.01.2029
Security awareness training(SAT)	TASAC-Tanzania	08274	NIL
Rating Forming Part of a Navigation Watch (RFPNW)	TASAC-Tanzania	05139	NIL
Able Seafarer Deck(ASD)	TASAC- Tanzania	018448	NIL
BASIC TRAINING FOR OIL AND CHEMICAL TANKER CARGO OPERATION (BTOCTCO)	TASAC Tazania	01817	NIL
BASIC SAFETY TRAINING CERTIFICATE (BST)	DMI – Tanzania	00611	24.07.2028
HYDROGEN SULPHIDE SAFETY (H2S)	DMI- Tanzania	00362	04.07.2028

Sea Services Records

NO	VESSEL NAME/ IMO NO	RANK	TYPE OF VESSEL	GRT/HP	SIGNING ON DATE	SIGNING OFF DATE	DURATION	COMPANY/ CONTRACTOR	TRADING AREA
					DATE	DATE			
1	TUG ALPHA PINA	AB	TUG BOAT	1381GRT	15.04.2019	18.01.2020	09 Months	TPA	FG
2	MT MOHAMMAD	AB	TUNKER	7504231	25.02.2020	01.11.2020	09 Months	MT MOHAMMAD	
3	TUG CHATU		TUG BOAT	771GRT	01.01.2021	20.10.2021	09 months	ZPC	FG
4	TUG SHUWARI		TUG BOAT	140 GRT	26.01.2022	27.07.2022	6 Months	ZPC	COASTAL
5	F.B SEAGULL	AB	TUG SUPPLY	576 GRT	22.08.2022	05.05.2023	09 months	ZPC	COASTAL
6	MV. STANFORD NILE	АВ	CREW BOAT	246 GRT	01.08.2023	01.03.2024	08 Months		ST. VINCENT AND THE GRENADINES







UNITED REPUBLIC OF TANZANIA



MINISTRY OF HEALTH

CERTIFICATE OF COVID-19 VACCINATION

Mohammed Said Abdullah **Full Name**

IVD00019376541 **Ref Number**

TAE476399 **ID** Number

Jun 9, 2003 Date of Birth

me ber	i	inistered	Date of Vaccination	Center of Vaccination
Janssen 800.	03033	✓ 1st Dose	Dec 3, 2022	KIGAMBONI Health Center

Scan to validate

Blomakuby

Permanent Secretary

ISSUED BY: Prof. Abel Makubi

Please keep this card, it contains important information regarding the COVID-19 vacc ine you have received

* Voir les conditions de validité à la page 3.

* Requirements for validity of certificate on page 2.

Address of the holder

Change of address

Change of address

Next of kin and relationship

JAMUHURI YA MUUNGANO WA TANZANIA – THE UNITED REPUBLIC OF TANZANIA SERIKALI YA MAPINDUZI ZANZIBAR – THE REVOLUTIONARY GOVERNMENT OF ZANZIBAR

KITAMBULISHO CHA UBAHARIA NA REKODI ZA BAHARINI SEAFARER'S INDENTIFICATION AND SEA SERVICE RECORD BOOK Aina / Type:

Kanuni / Code: TZA Nambari ya Utambulisho / Identification No.: ZMA-SDB-220065

Jina la Ukoo / Surname: ABDULLAH

Jina / Given Names:

MOHAMMED SAID

Tarehe ya kuzaliwa / Date of Birth: 09/06/2003

Utaifa / Nationality:

Tanzanian

Tarehe iliyotolewa / Date of Issue:

26/01/2022

Pahali ilipototewa / Place of Issue:

Zanzibar

Jinsia / Sex:

M

Tarehe ya Mwisho wa Matumizi / Date of expiry:

26/01/2027

Saini ya Mmiliki / Holder's Signature:



DESCRIPTION OF HOLDER

Place of birth MAGHARIBLA

Permanent Address MJINLMAHARIBLA

ZANZIBAR - TANZANIA

Height (cm) 170

Colour of Eyes BLACK

Colour of Hair BLACK

Capacity RATING

This is to certify that the particulars stated herein have been verified to the satisfaction of the Maritime Administration.

The Officer

Place and date of issue

GENEVA, 25/09/2023

Name MOHAMMED SAID

Surname ABDULLAH





Signature of holder



All particulars to be in BLOCK CAPITALS PERSONAL DESCRIPTION

ABDULL AH

COO298

PHOTOGRAPH OF SEAFARER



Registrar's Embossing Stamp

Other names:

MOHAMED SAID

Birth (a) Date 09.06. 2003 (b) Place MUIN (

Colour of (a) Eyes BLACK

(b) Hair BLACK

Complexion BLACK Height 180 cm

Distinguishing Marks (if any) ML

Nationality TAN 2AM AN

Home address P.O.BOX 1404, MWM

ZAYZIRAR

E-mail: Medygraphor @ gand.com

Name, Relationship & Address of next of kin ASIA

NASSOR SHARAN

P.O.BOX 1404 MINI, 241216AR

SIGNATURE OF SEAFARER



LEFT THUMB PRINT (AND SIGNATURE OF A WITNESS IF SEAFARER CANNOT WRITE HIS /HER NAME):



CERTIFICATE OF DISCHARGE

Compiled from Lists of Crew and official Log Books or from other

CERTIFICATE OF DISCHARGE

Compiled from Lists of Crew and official Log Books or from other Official Records and copy of Report of Character if desired by the Scafarer	Compiled from Lists of Crew and official Log Books or from other Official Records and copy of Report of Character if desired by the Seafarer			
No. Name of ship and official Date and place Rating Engagement* Discharge	Description Copy of report of Character Signature of (1) Master and of Voyage For ability Conduct (2) Officer and Official Stamp			
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E UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC



ISO 9001:2015 CERTIFIED

Medical Fitness Certificate

This certificate is issued in compliance with International Convention on Standards of Training and Watchkeeping for Seafarers 1978, as amended (STCW) regulation 1/9, the Maritime Labour Convention, (MLC 2006), regulation 1.2 and Reg. 9 of the Merchant Shipping (Medical Examinations) Regulations, GN. No. 327 of 2023 made under Merchant Shipping Act Cap. 165. Middle Name Date of Birth: Day/Month/year: Gender: Male: Proof of identity: Kind of identity: (e.g., National ID, CDC, Driver's License, Passport) Department: Deck Engine: Catering Other (specify): .. I have evaluated the above named applicant according to the seafarer's medical fitness standards and certification requirement established in accordance with the provision of regulation 1/9 of the STCW Convention, 1978 as amended, regulation 1.2 of the Maritime Labour Convention, 2006 as amended and Reg. 9 of the Merchant Shipping (Medical Examinations) Regulations, GN. No. 327 of 2023 made under Merchant Shipping Act Cap. 165. On the basis of the applicants personal declaration, my clinical examination and diagnostic test results recorded on the medical examination form, I declare the applicant is: Fit-and is not suffering from any medical condition likely to be aggravated by, or to lender him/her unfit for service at sea or likely to endanger the health of other person on board. I can confirm the following: (tick the relevant box) Eyesight: Contact lenses Meets visual Visual aids (tick if Spectacles: acuity standards worn) Meets colour Date of last vision standards colour vision

Hearing: Meets hearings standards	Yes: No:	Lookout duties (Deck departments only)	Yes: No:
Unaided hearing satisfactory	Yes: No:	Fit for lookout duties	Yes: No:
Date of examination	16,04	2024 Place of examinatio	RESSALAAM
Expire date of Certi	1,0	5,04,2026 DO CHADLES	K, OTITO
	medical practitioner:	I VIAL VIII II VIAL	cial Stamp:
Lacknowledge that	I have been advised on th	e content of the medical examinations of a charge of my medical sta	ion report and my right to seek a review
of the content of certificate should be	this certificate. In the evolution of th	ent of a charge of my medical sta ed medical practitioner.	*
Applicant's signatu	ire:	(Signed in the presence	e of the approved medical practitioner)

EDEN MEDICAL CLINIC

Dr. Charles K. Otito, MD, MMED

Community Health Consultant
P O. Box 65202, Dar es Salaam

MAVUNO HOUSE, Azikiwe Street

- General Physician
 Aviation Medical Examiner (AME)
 Seafarers Medical Services (TASAC)





EDEN IN MAYUN P.O. BO

EDEN MEDICAL CLINIC

MAVUNO HOUSE, AZIKIWE ROAD P.O. BOX 65202,TEL.0713-321426 DAR ES SALAAM

Name: MoHAMMED SAID A GROWAH 2 Sex M M/F Card No: OPDOD 21 Diagnosis: No NE Specimen: BM Clinical Finding:- INVESTIGATION REQUESTED Random blood glucose: 4.6 Mmm Urinalysis/ Urine Festing blood glucose: Urobilinogen: Medical Succession of the Community of the Cardinal Succession of th	Seafarers Laborator	y Investigation Form
Card No: OPD00 21 Diagnosis: No NE Specimen: Blu Clinical Finding:- INVESTIGATION REQUESTED Random blood glucose: Urobilinogen: Urobilinoge	Name. MOHAMMED SAID A	BOULLAH 21 M MIE
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Date: BLANCE AZIKIWE STreet Date: General Physician EDEN MEDICAL CLINIC Dr. Charles K. Otto, MD, MMED Dr. Charles K. Otto, MD, MMED Community Health Consultant MAWNO HOUSE, Azikiwe Street General Physician	Chest X-Ray-PA.	LATOO
Dato: To LABORATORY/EXRAY/EGO ECILO Dr. Charles K. Otito, MD, MMED Community Health Consultant PLOGRASSIA Dates Salaam MAVINO HOUSE, Azikiwe Street General Physician		
NB: REPORT OVERLEAF • Aviation Medical Examiner (AME) • Seafarers Medical Services (TASAC)	101/110===11	NAY/EGO ECULOS MED Dr. Charles K. Otito, MD, MMED Consultant Pt. Consultant Pt. Consultant Pt. Consultant Pt. Consultant Pt. Consultant MAYUNO HOUSE, Azikiwe Street General Physician Aviation Medical Examiner (AME)



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



MR. MOHAMMED SAID ABDULLAH

This is to certify that.....

Has successfully completed an approved PERSONAL SURVIVAL TECHNIQUES 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/1-1 of the STCW Code.



ef. E. E. MARIDAW

Signature of the Holder





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



	MR.	MOHAMMED	SAID	ABDULLAH
This is to	certify	that		

09.06.2003

Date of birth......Place of birth....

MJINI

Has successfully completed an approved ELEMENTARY FIRST AID 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/1-3 of the STCW Code.

Signature of the Holder







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



MR. MOHAMMED SAID ABDULLAH

This is to certify that.

09.06.2003

MJINI

Date of birth.......Place 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].

Issued on. 17.12.2021

TOO!

Signature of the Holder



OFF. E.E. MARIMANI

12

FPFF

No. 07954



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



MR. MOHAMMED SAID ABDULLAH This is to certify that.....

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 Vetchkeeping for Seafarers (STCW) 1978 as amended [2010], Section A- I/1 and Table A-VI/1-2 of the STCW Code.

Issued on. 17.12.2021 Valid Until 16.12.2026

Signature of the Holder

AF E. E. HARITANI

PSCRB

No. 06134



THE UNITED REPUBLIC OF TANZANIA MINISTRY OF TRANSPORT ANZANIA SHIPPING AGENCIES CORPORATION



Has successfully 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].

04.01.2029

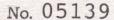
05.01.2024 Issued on.....Valid Until....



Signature of the Holder









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



This is to certify that MR. MOHAMMED SAID ABDULLAH

Date of birth 09.06.2003 Place of birth MJINI

Has successfully 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].

17.07.2023

Issued on

A.

Signature of the Holder



LAMECK SONO



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



This is to	to	partify that	MR.	MOI	HAMMI	ED S	AID	ABDU	LLAH
	13	w	ceruiy ma	*******	*****	*******			

Date of birth 09.06.2003 Place of birth MJINI

Has successfully 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 Watch keeping for Seafarers (STCW) 1978 as amended [2010].

Issued on 16.09.2022

Signature of Holder



aph E. E. MARIDANI

PSSR

No. 08870



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



MR. MOHAMMED SAID ABDULLAH This is to certify that.....

09.06.2003

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.

Issued on 17.12.2021 Valid Until 16.12.2026

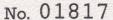


Signature of the Holder



E. E. MABJAWI

втостсо





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

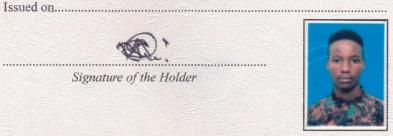


MR.	MOHAMMED	SAID	ABDULLAH
This is to certify that			
09.06.2003 Date of birth	Place of bi	irth	MJINI
Has successfully completed a			

Certificate has been issued under Regulation V/1-1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

15.12.2023

Signature of the Holder



DAR ES SALAAM MARITIME INSTITUTE (DMI)

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



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

T NO. 00611

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

Student Number DMI/BST/04/31/022

This is certify that

MOHAMMED SAID ABDULLAH

Identify document number ZMA-SDB-220065

BASIC SAFETY TRAINING CERTIFICATE

In accordance with regulation as per Section A-V/1 of the International Convention on Standard of Training. Certification and Watch Keeping for Seafarers 78/2010 manila amended.

PERSONAL SURVIVAL TECHNIQUES (Table –AVI/1-1) FIRE PREVENTING AND FIRE FIGHTING (Table-AVI/1-2) ELEMENTARY FIRST AID (Table – AVI/1-03) PERSONAL SAFETY AND SOCIAL RESPONSIBILITIES (Table-AVI/1-4)

From 28/06/2023

to

05/07/2023

Signature of Course Coordinator Signature of the Candidate

05TH JULY, 2023

04TH JULY, 2028

Date of Issue

Expiry Date

DAR ES SALAAM MARITIME INSTITUTE (DMI)

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

T NO. 00362



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/H2S/01/41/0010

This is certify that

MOHAMMED SAID ABDULLAH

Holder of **ZMA-SDB-220065** and Passport No: **TAE 476399** 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)

From 28/06/2023

to

05/07/2023

Signature of Course Coordinator

04TH JULY, **2028**

Signature of the Candidate

05TH JULY, 2023

Expiry Date

Date of Issue