



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



## APPLICATION FORM

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<b>Position</b>	<b>identity card PIN Number 54K7NL7</b>
<b>Position Applied for:</b>	Second Engineer
<b>Date Available from:</b>	-

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: SABIR</b>	<b>Last Name: KHANTAMIROV</b>	
Date of Birth: 13.05.1990	Place of Birth (City and Country): Azerbaijan, NEFTCHALA	
Email: sabir.xantemirov90@gmail.com	Mobile Number: (+994) 77 572 90 23	
Permanent Address: Banka settlement , Neftchala district , Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: -	
<b>Person to call in emergency: (+994) 51 623 89 22 Brother</b>		

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<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
<b>First Name</b>	<b>Last Name</b>	<b>Gender</b>	<b>Relation</b>	<b>Contact</b>
Samir	Khantamirov	Male	Brother	+994 51 623 89 22

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<b>Maritime Education</b>				
<b>Name of school</b>	<b>Country</b>	<b>From</b>	<b>To</b>	<b>Type of degree or diploma</b>
Azerbaijan State Marine Academy	Azerbaijan	2008	2012	Bachelor

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<b>Physical Data</b>	
Height	178
Weight	90
Boilersuit Size	L
Shoes Size	43
Blood group	All)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

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<b>Seaman`s Book &amp; Identify Docs</b>					
<b>DOCUMENT</b>	<b>COUNTRY</b>	<b>NUMBER</b>	<b>DATE OF ISSUE</b>	<b>PLACE OF ISSUE</b>	<b>DATE OF EXPIRY</b>

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 016411		16.09.2020	Azerbaijan		16.09.22025
Certificate of Competency	Azerbaijan	0006620		19.09.2022	Azerbaijan		19.09.1990
Republic of Azerbaijan	Azerbaijan	C01363306		04.04.2017	Azerbaijan		03.04.2027
Seaman Book	Panama	PA0287147		08.11.2022	Panama		19.02.2027
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				-			

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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 &amp; Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-1642-20	SMPA	08.12.2020	30.11.2025
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1642-20	SMPA	08.12.2020	30.11.2025
ELEMENTARY FIRST AID	Azerbaijan	SO-1642-20	SMPA	08.12.2020	30.11.2025
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1642-20	SMPA	08.12.2020	30.11.2025
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1642-20	SMPA	08.12.2020	30.11.2025
International Safety Management	Azerbaijan	SP-1191-20	SMPA	02.12.2020	24.11.2025
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1231-20	SMPA	04.12.2020	27.11.2025
Security Awareness Training For All Seafarers	Azerbaijan	SI-0832-20	SMPA	28.11.2020	13.11.2025
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1530-22	SMPA	12.08.2022	12.08.2027
Eugenie-room resource management	Azerbaijan	ER-0487-22	SMPA	10.08.2022	10.08.2027
Leadership & Teamwork	Azerbaijan	DL-1244-22	SMPA	08.08.2022	08.08.2027
Advanced Training in Fire Fighting	Azerbaijan	SJ-0111-24	SMPA	06.02.2024	06.02.2029
Medical First Aid	Azerbaijan	SN-0878-22	SMPA	27.07.2022	27.07.2024
1000 Voltage	Azerbaijan	DM-0129-23	SMPA	19.05.2023	19.05.2028

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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
FEYZ GROUP	M/V KLC COMMANDER	Panama	General Cargo Vessel	5788	MAK	2992	-	Second Engineer	02.03.2021	06.08.2021	5 months	End of Contract
FG SHIPPING AND TRADING CO	M/V FG ARZU	Panama	General Cargo Vessel	3432	Wuksi	1972	-	Second Engineer	07.10.2022	11.12.2022	2 months	End of Contract
ANGORA 4 SHIPPING LIMITED	M/V ANGORA 4	Liberia	General Cargo Ship	6933	Wartsila	5684	-	Second Engineer	05.01.2023	21.05.2023	4 months 16 days	End of Contract
FG SHIPPING AND TRADING CO	M/V FG SEFA	Panama	General Cargo Ship	3346	MAK	1972	-	Second Engineer	30.07.2023	25.11.2023	4 months	End of Contract
SKY MARINE SHIPPING INC	M/V SKY MARINE	Panama	General Cargo Ship	4725	MAK	2748	-	Second Engineer	04.03.2024	22.09.2024	6 months	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**

Turkish Language : Good  
 Russian Language : Average  
 English Language : Average

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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
<b>Vaccination</b>		
Yellow Fever	YES/NO	YES
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.FEYZ GROUP	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: 24.10.2024

\_\_\_\_\_  
Signature

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