



APPLICATION FORM

1	Position	identity card PIN Number 0XTQC24
	Position Applied for:	Officer in charge of a navigational watch
	Date Available from:	-

Gender: Male 2 **Personal Information** First Name: ELSHAN Last Name: MURADOV Date of Birth: 14.03.1972 Place of Birth (City and Country): Azerbaijan, NEFTCHALA Email: -Mobile Number: (+994) 50 630 56 92 Permanent Address: S. Vurgun street, Expected Salary Per Month: -Banka settlement, Neftchala, Azerbaijan Nationality: Azerbaijan Alternative rank applying for: Able Seafarer Deck, Boatswain Person to call in emergency: (+994) 55 514 75 30 Brother

Family Details: (If Unmarried kindly give details of Father / Mother)

First Name Last Name Gender Relation Contact

Pirmammad Muradov Male Brother +99455 514 75 30

 Maritime Education
 Country
 From
 To
 Type of degree or diploma

 Volga State Marine Academy
 Azerbaijan
 2018
 2023
 Bachelor

Height

Height

183

Weight

Boilersuit Size

Shoes Size

Blood group

Additional Physical Information:{You can write any other information you want to add about your physique in this field.}

| Seaman's Book & Identify Docs | DOCUMENT | COUNTRY | NUMBER | DATE OF ISSUE | PLACE OF ISSUE | DATE OF EXPIRY

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Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair

Seaman Book	Azerbaijan	DQK	018403	11.09.2021	Azerb	aijan	11.09.2026
Certificate of Competency	Azerbaijan	0008209		31.05.2024	Azerb	aijan	31.05.2029
Certificate of Competency	Azerbaijan	RP06172		04.03.2022	Azerb	aijan	
Republic of Azerbaijan	Azerbaijan	C02223092		23.10.2018	Azerb	aijan	22.10.2028
Do you hold a US Vis	Do you hold a US Visa 'C1/D'?		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				-			

7 Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8 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 TECHNICS	Azerbaijan	SO-1419-20	SMPA	31.10.2020	29.10.2025		
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1419-20	SMPA	31.10.2020	29.10.2025		
ELEMENTARY FIRST AID	Azerbaijan	SO-1419-20	SMPA	31.10.2020	29.10.2025		
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1419-20	SMPA	31.10.2020	29.10.2025		
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1419-20	SMPA	31.10.2020	29.10.2025		
International Safety Management	Azerbaijan	SP-1098-21	SMPA	30.06.2021	30.06.2026		
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1024-23	SMPA	16.03.2023	16.03.2028		
Security Awareness Training For All Seafarers	Azerbaijan	SI-0710-24	SMPA	04.03.2024	Unlimited		
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-2884-23	SMPA	27.10.2023	27.10.2028		
Medical First Aid	Azerbaijan	SN-1471-23	SMPA	28.09.2023	28.09.2028		
Leadership & Teamwork	Azerbaijan	DL-0983-23	SMPA	30.11.2023	29.11.2028		
Advanced Training in Fire Fighting	Azerbaijan	SJ-0942-23	SMPA	13.07.2023	13.07.2028		
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0010-24	SMPA	29.01.2024	26.01.2029		
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SR-0209-23	SMPA	24.11.2023	24.11.2028		
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0502-23	SMPA	08.09.2023	08.09.2028		
Bridge Resource Management	Azerbaijan	SW-0406-23	SMPA	19.09.2023	19.09.2028		

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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	Azerbaijan	Hopper Dredger	1866	-	2044	-	Able Seaman	26.08.2022	31.12.2022	4 months	End of Contract
ASCO	M/V M.B.MAMMADOV	Azerbaijan	Hopper Dredger	583		2081	-	Operator	01.01.2023	31.01.2023	30 days	End of Contract
ASCO	M/V NARVA	Azerbaijan	Hopper Dredger	1866		2044	-	Able Seaman/Operator	01.03.2023	31.08.2023	5 months 30 days	End of Contract
ASCO	M/V NARVA	Azerbaijan	Hopper Dredger	1866	-	2044	-	AB Seaman	01.02.2024	02.03.2024	1 month	End of Contract

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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

11	For Engineers (Please prov	ide details)
	_	-
	Generators	
	Purifiers and Boilers	-

Type of Cranes / No of Reefer Containers

12 Other Experience

Russian Language : Good Azerbaijan : Good

English Language: Average

12 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	-

13 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)

14 Medical history

modical motory		
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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16 References (Please give the name and address of your current or immediate past employer)

Name of company	1. AZERBAIJAN SHIPPING COMPANY	2
Name of person to contact	-	-
Address	Azerbaijan/Baku	-
☎ No.	-	-

17	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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