



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

1

Position	identity card PIN Number 613XRSY
Position Applied for:	Officer in charge of a navigational watch
Date Available from:	-

2

Personal Information	Gender: Male
First Name: MAHABBAT	Last Name: AMIRASLANOV
Date of Birth: 12.03.1995	Place of Birth (City and Country): Azerbaijan, AGHSTAF
Email: muhabbetazeri9090@gmail.com	Mobile Number: (+994) 50 858 99 39
Permanent Address: Aghstafa district , Azerbaijan	Expected Salary Per Month: -
Nationality: Azerbaijan	Alternative rank applying for: 3 RD Officer
Person to call in emergency: (+90) 5394664089 Brother	

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Mahammad	Amiraslanov	Male	Brother	+905394664089

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Maritime College	Azerbaijan	2015	2019	Sub-Bachelor

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Physical Data	
Height	171
Weight	73
Boilersuit Size	M
Shoes Size	42
Blood group	O(I)RH+
Additional Physical Information: {You can write any other information you want to add about your physique in this field.}	

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

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 029673		05.09.2024	Azerbaijan		05.09.2029
Certificate of Competency	Azerbaijan	0008293		22.08.2024	Azerbaijan		22.08.2029
Certificate of Competency	Azerbaijan	RP09863		14.11.2019	Azerbaijan		14.11.2029
Republic of Azerbaijan	Azerbaijan	C00759476		26.08.2015	Azerbaijan		25.08.2025
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 & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-2764-24	SMPA	16.07.2024	12.07.2029
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-2764-24	SMPA	16.07.2024	12.07.2029
ELEMENTARY FIRST AID	Azerbaijan	SO-2764-24	SMPA	16.07.2024	12.07.2029
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-2764-24	SMPA	16.07.2024	12.07.2029
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-2764-24	SMPA	16.07.2024	12.07.2029
International Safety Management	Azerbaijan	SP-2148-24	SMPA	04.07.2024	01.07.2029
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2257-24	SMPA	08.07.2024	04.07.2029
Security Awareness Training For All Seafarers	Azerbaijan	SI-2351-24	SMPA	31.05.2024	Unlimited
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1770-24	SMPA	31.05.2024	Unlimited
Medical Firs Aid	Azerbaijan	SN-0521-24	SMPA	15.05.2024	Unlimited
Leadership & Teamwork	Azerbaijan	DL-0407-24	SMPA	24.06.2024	21.06.2029
Advanced Training in Fire Fighting	Azerbaijan	SJ-0677-24	SMPA	14.06.2024	14.06.2029
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0410-24	SMPA	10.05.2024	03.05.2029
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SR-0142-24	SMPA	07.06.2024	07.06.2029
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0312-24	SMPA	24.05.2024	24.05.2029
Bridge Resource Management	Azerbaijan	SW-0302-24	SMPA	28.06.2024	28.06.2029

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(Please give a full record starting with the last vessel on which you served)

[illegible]

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11 For Engineers (Please provide details)

Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

12 Other Experience

English Language :B2
Russian Language : B1
Power Point , Excel, Word – Good

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)

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14 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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15 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.SKY GROUP	2.-
Name of person to contact	-	-
Address	Istanbul /Turkey	-
☎ 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: 06.11.2024

Signature

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