

Tel: +944553961673 +994123710556

E-mail:

APPLICATION FORM

Position Applied for						Date Available from:				
1. Personal Data										
Family Name: ASGAROV Fire				irst Name:BABAK			Middle Name: +994553961673			
				Place of Birth (City and Country): AZERBAIJAN, BAKU			Citizenship: AZERBAIJAN.			
Permanent Address AZERBAIJAN. BAK	U. KAR	IMOV 2.	16				Home): +0123710556 Business/ obile)	5		
2. Maritime Education	n									
Name of school C			ountry Town From		From	То	To Type of degree or diploma			
Azerbaijan State Marine A	cademy	AZERBAI	YJAN	BAKU						
3. Professional Test										
English Test Date			Name of Test			Score				
Professional Test Date			Name of Test			Score				
Professional Interview Date. NO			Result.							
4. Family Details										
Civil Status(Single, N	larried,	Separated.	Divor	ced, Widov	ved): N	IARRIE	D			
Next of Kin (the first	emerger	ncy contac	t) NO			R	elationship NO			
Address of Residence						Pł	none :			
	D	aughter		Son			Daughter	Son		
Family Name	ASG	AROVA		ASGARO	V					
First Name						*				
Date of Birth		2002		2003						
City of living	В	AKU		BAKU						
Phone Numbers	100110		+99412							

Document	Country Number		er		Place of	Issue Date	Expiry Date		
Seaman's Book	AZERBAIJAN DQK№0220-				Caspian Ship	25.11.2022	25.11.2027		
Travel Passport	AZERBAIJAN P4319344		4			18.09.2021	17.09.2031		
Civil Passport	A ZEDDALIAN AA 400590		801					30.05.2031	
6. Valid Visa N	0	71-171-17	-97	1 1 2					
Country or Unio		7	ype			Valid Until			
				A			4		
7. Courses Atten	dad and Cartific	ates Ohtai	ned	A DESCRIPTION OF THE PARTY OF T					
The state of the s		ares Obtain	100	Number	Da	ites	Pla	CO	
Document				Number	Issue	Expiry			
CERTIFICATE OF COMPETENCY			1	0709/15	06.11.2015	06.11.2020	AZERB		
MEDICAL FIRST AID				SN-			AZERBAIJAN		
(STCW-78,A-VI/1-1/1-2/1-3/1-4.)			SC	0-2955-19	03.12.2019	03.12.2024	AZERBAIJAN		
PROFICIENCY IN SURVIVAL CRAFT			SI	2955-19	20.11.2023	17.11.2028	AZERBAIJAN		
INTERNATIONAL SAFETY MANAGEMENT				SP-			AZERBAIJAN		
SHIP SECURITY-RLATED TRAING AND			S	1-2938-22	25.12.2022	25.11.2027	AZERBAIJAN		
NSTRUCTION									
STCW CODE, A-11/1, A-11/2, B-V/b, B-V/c			SI	K-0705-22	22.11.2022	22.11.2027	AZERBAIJAN		
TRAINING FOR SEAFARERS WITH DESIGNATED					29.11.2019	29.11.2024	AZERBAIJAN AZERBAIJAN		
BASIK TRAINING	AND QUALIFICATE	TION ON OI	L S	A-0944-22	01.12.2022	01.12.2027	AZERB	SAIJAN	
ANDC	III PIICAL TAIRE								

Weight Colour of Hair Colour of Eyes Boilersuit Size	the past? st 12 months for an ill ems now? Passed:	ness/accident?	Yes till:	No NO NO NO
Colour of Hair Colour of Eyes Boilersuit Size Shoes Size 9. Medical History Have you ever signed off a ship due to med Did you undergo any medical operation in Have you consulted a doctor during the las Do you have any health or disability problet If yes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	BROWN XL 44 dical reasons? the past? st 12 months for an ill ems now? Passed:			NO NO
Colour of Eyes Boilersuit Size Shoes Size 9. Medical History Have you ever signed off a ship due to med Did you undergo any medical operation in Have you consulted a doctor during the last Do you have any health or disability problet of yes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	XL 44 dical reasons? the past? st 12 months for an ill ems now? Passed:			NO NO
Boilersuit Size Shoes Size 9. Medical History Have you ever signed off a ship due to med Did you undergo any medical operation in Have you consulted a doctor during the last Do you have any health or disability problet fryes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	XL 44 dical reasons? the past? st 12 months for an ill ems now? Passed:			NO NO
Shoes Size 9. Medical History Have you ever signed off a ship due to med Did you undergo any medical operation in Have you consulted a doctor during the last Do you have any health or disability problet fryes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	dical reasons? the past? st 12 months for an ill ems now? Passed:			NO NO
9. Medical History Have you ever signed off a ship due to med Did you undergo any medical operation in Have you consulted a doctor during the last Do you have any health or disability problet of yes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	dical reasons? the past? st 12 months for an ill ems now? Passed:			NO NO
Have you ever signed off a ship due to med Did you undergo any medical operation in Have you consulted a doctor during the last Do you have any health or disability problet fryes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	the past? st 12 months for an ill ems now? Passed:			NO NO
Did you undergo any medical operation in Have you consulted a doctor during the last Do you have any health or disability problet of yes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	the past? st 12 months for an ill ems now? Passed:		till:	NO NO
Have you consulted a doctor during the last Do you have any health or disability problem of yes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria	st 12 months for an ill ems now? Passed:		till:	NO
Do you have any health or disability proble f yes, please give full details: International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria 10. References (please give name and address of your contents)	Passed:		till:	
International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria 10. References (please give name and address of your contents)	Passed:	Valid	till:	NO
International Medical Examination Vaccination Against Yellow Fiver Vaccination Against Diphtheria 10. References (please give name and address of your contents)		Valid	till:	
10. References (please give name and address of your control of the state of the st	current or past employer)			
	current or past employer)			
Name of Company	carrett or past employer)	Office rem	arks	
Name of person to contact				
Address				
Phone				
Name of Company				
Name of person to contact				
Address				
Phone				
11. Bank address for allotments				
Beneficiary				
Account No.				
Name of Bank				
Bank Address				
12. Knowledge and experience		Yes		No
OCIMF vetting experience:				
ISGOT knowledge:				
13. I hereby declare that the above, inclu	uding Medical Histo	ry, is true		,
Place Date		Signature		
14. For Office use only				

15. Seagoing Experience

	C. PREVIOUS SEA SERVICE						
VESSEL	FLAG	TYPE / DWT	ENG / HP	RANK	S/ON	S/OFF	OWNERS
M/V NAFTALAN	AZERBAIJAN	TANKER	5000 KW	ABLE SEAMAN	2008	2013	CASHIAN SHIPPING
M/V SULTAN BEY	MALTA	GENERAL CARGO	6000 KW	ABLE SEAMAN	2014	2017	PALBUK 3 SHIPPING CO LTD
M/V NAHICEVAN	MALTA	GENERAL CARGO	7000 KW	ABLE SEAMAN	2014	2017	PALBUK 3 SHIPPING CO LTD
M/V GENERAL SHIKHLINSRY	MALTA	GENERAL CARGO /14762	6000 KW	ABLE SEAMAN	25.04.2018	26.11.2018	PALBUK 3 SHIPPING CO LTD
M/V GENERAL SHIKHLINSRY	MALTA	GENERAL CARGO /14762	6000 KW	ABLE SEAMAN	12.04.2019	26.11.2019	PALBUK 3 SHIPPING CO LTD
M/V VOLGO BALT 220	PANAMA	GENERAL CARGO/ 3300		ABLE SEAMAN	27.11.2021	25.05.2022	BALT WAVE 220 LTD
M/V VOLGO BALT 217	PANAMA	GENERAL CARGO/ 330		ABLE SEAMAN	06.07.2022	06.08.2022	BALT WAVE 217 LTD
M/V VOLGO BALT 213	PANAMA	GENERAL CARGO / 330		ABLE SEAMAN	16.08.2022	18.11.2022	BALT WAVE 213 LTD
M/V VIKTOR TARATIN	KAMAROS	GENERAL CARGO	1852 2x 1852 kw	ABLE SEAMAN	04.01.2023	24.11.2023	Cunda shipping

Total rank sea service: type of vessel sea service:

Total

Rank	Years	Type of vessel	Years
ABLE SEAMAN	20	OIL TANKER	
		LPG	
		DRY CARGO	
		TANKER ICE	
		OIL /CHEMICAL TANKER	
		FERRY	
Total	20	Total:	