

# CURRICULUM VITAE

**LUSEKELO NSEKELA ANANGISYE**

[nsekela39@gmail.com](mailto:nsekela39@gmail.com)

Mobile phone +255766105419

WhatsApp +255718363427



Rank	Oiler
Date of birth	04/02/1998
Address	Ubungo – Dar es salaam
Nationality	Tanzanian
Marital status	Single
Professional	Able seafarer

## Next Of Kin Emergency Contact

Name	Nelson Robins Nsekels
Permanent Address	Dar es Salaam
Phone/Home	+255764092121
Relation	Brother
Email	<a href="mailto:nensekela@gmail.com">nensekela@gmail.com</a>

NO	CERTIFICATES AS PER STCW	AUTHORITY	ISSUED DATE	EXPIRE DATE
1	Able seafarer engine	Tasac Tanzania	07/06/2024	NIL
2	Rating forming part of engineering watch	Tasac-Tanzania	30/07/2021	NIL
3	Proficiency in survival craft and rescue Boat	Tasac-Tanzania	15/09/2023	14/09/2028
4	Personal survival technique	Tasac-Tanzania	19/07/2024	18/07/2029
5	Fire prevention and fire fighting	Tasac-Tanzania	19/07/2024	18/07/2029
6	Personal safety and social responsibility	Tasac-Tanzania	19/07/2024	27/02/2029
7	Elementary first aid	Tasac-Tanzania	19/07/2024	18/07/2029
8	Medical first aid	Tasac-Tanzania	22/02/2019	NIL
9	Security awareness training	Tasac tanzania	06/03/2020	NIL
10	Hydrogen sulphide awareness training	Osha	09/23/2023	NIL
11	Basic safety training certificate	Tasac-Tanzania	21/08/2023	20/08/2028
12	Advanced fire fighting	Tasac – Tanzania	22/02/2019	21/02/2024

Travel Document	Number	Authority/Government	Issued Date	Expiry Date
Passport	TAE477670	PCO-DAR ES SALAAM	16/05/2022	15/05/2032
Seaman Book	DB04420	TASAC-TANZANIA	25/10/2021	24/10/2026
Medical Certificate		EDEN MEDICAL CLINIC	17/04/2023	16/04/2027

SEA SERVICE RECORDS FOR THE LAST							
S/N	VESSEL NAME	RANK	TYPE OF VESSEL	GRT/HP	SIGN ON DATE	SIGN OFF DATE	COMPANY
1	MV DMS CHALLENGER II	OILER	SUPPLY	1387/4000	NOV 2019	JUN 2020	TOPAZ MARINE
2	MV DMS CHALLENGER II	OILER	SUPPLY	1387/4000	AUG 2020	JUNE 2021	TOPAZ MARINE
3	TUG SATO	OILER	TUG	140/	JAN2022	MAY 2022	TPA
4	MV CISL LEEN	WELDER	CONTAINER	4544/1999	JUN 2022	SEP 2022	CISL
5	MV CISL LEEN	OILER	CONTAINER	4544/1999	SEP 2022	AUG 2023	CISL
6	ALPHA GRANADA	OILER/WELDER	TOWING TUG	472/3200	SEP 2023	APRIL 2024	ALPHA LOGISTICS

### **ACHIEVEMENTS**

- Participation in routine maintenance tasks, including painting, cleaning, and upkeep of the vessel's equipment and machinery to ensure smooth operations.
- Demonstrating leadership qualities when required, such as supervising junior crew members or taking charge of specific tasks or watch duties.
- Continual improvement through training and certification programs to enhance skills and knowledge in various aspects of maritime operations.

ASE

No. 03426



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



MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

Date of birth.....04.02.1998.....Place of birth.....RUNGWE.....

Has successfully completed an approved **ABLE SEAFARER ENGINE** course. This Certificate has been issued under Regulation III/5 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

07.06.2024

Issued on.....

*L. Anangisye*

Signature of the Holder



*LAMECK SONDO SD*

Name and Signature of duly Authorised Officer

RFPEW

No. 02731



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



This is to certify that **MR. LUSEKELO NSEKELA ANANGISYE**

Date of birth **04.02.1998** Place of birth **RUNGWE**

Has successfully completed an approved **RATING FORMING PART OF AN ENGINEERING WATCH** course. This Certificate has been issued under Regulation III/4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

Issued on **30.07.2021**

*L. Anangisye*

Signature of the Holder



**Cpt. E. E. MARIJAWI**

Name and Signature of duly Authorised Officer

SAT

No. 07375



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



MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

Date of birth.....04.02.1998.....Place of birth.....RUNGWE-MBEYA.....

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.....06.03.2020.....

L. Anangisye

Signature of the Holder



IPOGA NASHON IPOGA HET

Name and Signature of duly Authorised Officer



FPFF

No. 14255



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



ISO 9001:2015 CERTIFIED

MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

Date of birth.....04.02.1998.....Place of birth.....RUNGWE.....

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

Issued on.....19.07.2024.....Valid Until.....18.07.2029.....

.....*L. Anangisye*.....  
Signature of the Holder



.....*LAMECK SONDO*.....  
Name and Signature of duly Authorised Officer

EFA

No. 7091



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



ISO 9001:2015 CERTIFIED

MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

04.02.1998 RUNGWE  
Date of birth.....Place of birth.....

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.

19.07.2024 18.07.2029  
Issued on.....Valid Until.....

L. Anangisye  
Signature of the Holder



LAMECK SONDU

Name and Signature of duly Authorised Officer



PSSR

No. 14945



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



ISO 9001:2015 CERTIFIED

MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

04.02.1998 RUNGWE  
Date of birth.....Place of birth.....

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.

19.07.2024 18.07.2029  
Issued on.....Valid Until.....

L. Anangisye  
Signature of the Holder



LAMECK SINDO  
Name and Signature of duly Authorised Officer

PST

No. 15029



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



ISO 9001:2015 CERTIFIED

MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

Date of birth.....04.02.1998.....Place of birth.....RUNGWE.....

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.

Issued on.....19.07.2024.....Valid Until.....18.07.2029.....

.....*L. Anangisye*.....  
Signature of the Holder



.....*LAMECK SONDO*.....  
Name and Signature of duly Authorised Officer



PFRB

No. 02149



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



MR. LUSEKELO NSEKELA ANANGISYE

This is to certify that.....

Date of birth **04.02.1998** Place of birth **RUNGWE**

Has successfully completed an approved **PROFICIENCY IN FAST RESCUE BOATS** course. This Certificate has been issued under Regulation VI/2.2 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010].

Issued on **15.09.2023** Valid Until **14.09.2028**

*L. Anangisye*

Signature of the Holder



**LAMECK SONDO** *[Signature]*

Name and Signature of duly Authorised Officer

# Certificate of Completion

*This certifies that*

**LUSEKELO N. ANANGISYE Sr.**

*has successfully completed*

## Hydrogen Sulfide Awareness Training

And ASC Z390.1, Accepted Practices for Hydrogen Sulfide Safety Training Programs

**In Accordance with OSHA Regulations, 29 CFR 1910 and 1926 and ANSI Standard Z390.1**

Also Known as H2S Training

**This course is approved for 2 Contact Hours (.2 CEUs) of continuing education per the California Department of Public Health for Registered Environmental Health Specialist (REHS) (Accreditation # 044)**

Safety Unlimited, Inc., Provider #5660170-2, is accredited by the International Association for Continuing Education and Training (IACET) and is accredited to issue the IACET CEU. As an IACET Accredited Provider, Safety Unlimited, Inc. offers CEUs for its programs that qualify under the ANSI/IACET Standard. Safety Unlimited, Inc. is authorized by IACET to offer 0.2 CEUs for this program.

*Julius P. Griggs*

Julius P. Griggs  
Instructor #892

**23092361489089**

Certificate Number

**9/23/2023**

Issue Date



Scan this code or visit [safetyunlimited.com/v](https://www.safetyunlimited.com/v) to verify certificate.

Annual Refresher Training Required by ANSI Z390.1



**UNLIMITED, Inc.**  
OSHA Compliant Safety Training Since 1993

2139 Tapo St., Suite 228 Simi Valley, CA 93063  
(855) 784-2677 or 805 306-8027  
<https://www.safetyunlimited.com>

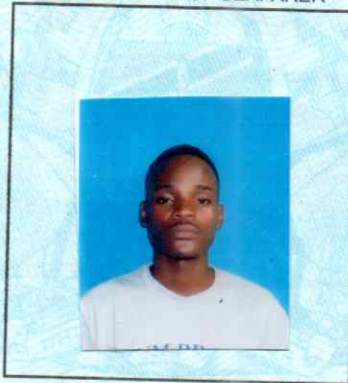
BOOK:

ISSUED TO: <b>ANANGISYE</b>			
SURNAME <b>LUSEKELO NSEKELA</b>			
OTHER NAMES			
DATE OF BIRTH <b>04.02.1998</b>		PLACE OF BIRTH <b>RUNGWE MBEYA</b>	
COLOUR OF EYES <b>BLACK</b>	HEIGHT <b>174cm</b>	WEIGHT <b>56kg</b>	SEX <b>M</b>
COLOUR OF HAIR <b>BLACK</b>	DATE OF EXPIRY <b>24.10.2026</b>		
DISTINGUISHING MARKS <b>NIL</b>			
DATE OF ISSUE <b>25.10.2021</b>		PLACE OF ISSUE <b>TASACHA DARESSALAAM</b>	

PAGE 2

DB 04420

PHOTOGRAPH OF SEAFARER

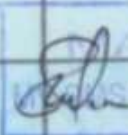



PAGE 3

*L. Anangisye*






SIGNATURE OF SEAFARER

DB 04420

NAME OF VESSEL OFFICIAL NO. GROSS TONNAGE OR HORSEPOWER*	DATE AND PLACE OF		GRADE/ RANK	DESCRIP TION OF VOYAGE	SIGNATURE OF MASTER	COMPANY STAMP OR SEAL
	ENGAGEMENT	DISCHARGE				
MV DMS CHALLENGER II PORT OF REG : MAJURO FLAG : MARSHALL ISLANDS IMO NO : 9338931 CALL SIGN : V7LX4 GRT : 1387 NET : 410 BHP : 400	02 <sup>nd</sup> Nov. 2019	01 <sup>st</sup> Jun. 2020	CHIEF	FG	 MASTER MV DMS CHALLENGER II	
MV DMS CHALLENGER II PORT OF REG : MAJURO FLAG : MARSHALL ISLANDS IMO NO : 9338931 CALL SIGN : V7LX4 GRT : 1387 NET : 410 BHP : 400	13.08.2020 JALU-AL	20.06.2021 DMS PORT	CHIEF	F-G	 MASTER MV DMS CHALLENGER II	

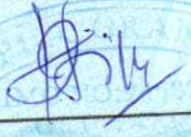

\*ENGINE ROOM WORKERS GIVE HORSEPOWER, OTHERS GROSS TONNAGE

DB 04420

NAME OF VESSEL OFFICIAL NO. GROSS TONNAGE OR HORSEPOWER*	DATE AND PLACE OF		GRADE/ RANK	DESCRIP TION OF VOYAGE	SIGNATURE OF MASTER	COMPANY STAMP OR SEAL
	ENGAGEMENT	DISCHARGE				
	01/11/2021	21/05/2022	OILER	COASTAL		
<b>M.V. CISL LEENE</b> CALL SIGN: 51M817 GRT/NRT: 3412/1628 BHP/KW: 2820/1999 FLAG: TANZANIA	05/06/2022	07/09/2022	WELDER	F.G		
<b>M.V. CISL LEENE</b> CALL SIGN: 51M817 GRT/NRT: 3412/1628 BHP/KW: 2820/1999 FLAG: TANZANIA	07/09/2023	12/03/2023	OILER	F.G		

\*ENGINE ROOM WORKERS GIVE HORSEPOWER, OTHERS GROSS TONNAGE

**DB 04420**

NAME OF VESSEL OFFICIAL NO. GROSS TONNAGE OR HORSEPOWER*	DATE AND PLACE OF		GRADE/ RANK	DESCRIP TION OF VOYAGE	SIGNATURE OF MASTER	COMPANY STAMP OR SEAL
	ENGAGEMENT	DISCHARGE				
ALPHA BRANADA POLC11 472 3200 HP	27.09.2023 VONDACA	16/04/2024 MOMBASA	Chief Boat	P.6		

\*ENGINE ROOM WORKERS GIVE HORSEPOWER, OTHERS GROSS TONNAGE

VISA / VISAS

URT

P

TZA

TAE477670

## ANANGISYE

**LUSEKELO NSEKELA**

TANZANIAN

04 FEB 1998

M

**RUNGWE**

16 MAY 22

PCO, DAR ES SALAAM

Sahihi ya mwenye pasipoti/Signature/Signature

15 MAY 32

L. Angulo y O.

P<TZAANANGISYE<<LUSEKELO<NSEKELA<<<<<<<<<<<  
TAE4776706TZA9802045M3205150<<<<<<<<<<<<<06

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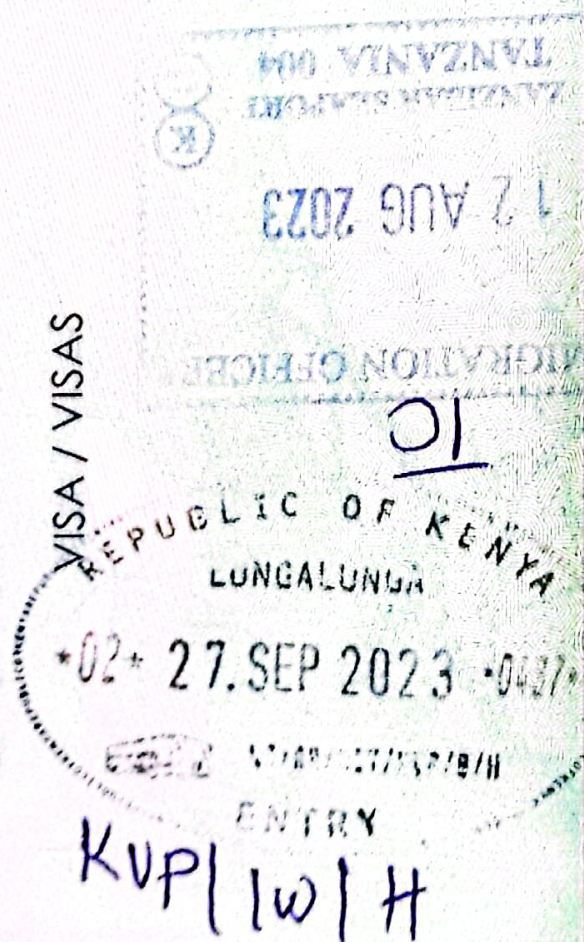


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VISA / VISAS



KVP | lw | H



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VISA / VISAS



VISA / VISAS



EX-SHP ~~2024~~  
15/04/2024

IMMIGRATION OFFICER  
16 APR 2024  
HOROHORO  
TANZANIA  
WVS  
17





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



ANANGISYE

Medical Fitness Certificate

LUSEKELO

NSEKELA

Name .....  
Last Name

First Names

Middle Name

Gender: Male ☒ Female ☐

Date of birth (day/month/year) 04, 02, 1998

Nationality TANZANIAN

Home address

MABIBO UBUNGO DARESSALAAM

Proof of identity: Kind of identity ID Number 19070204\_53118\_00001-27  
(e.g., National ID, CDC, Driver's License, Passport)

I have evaluated the above named applicant according to the Merchant Shipping (Medical Examination) Regulations, 2016, made under the Merchant Shipping Act, 2003. On the basis of the applicant's personal declaration, my clinical examination and diagnostic test results recorded on the medical examination form, I declare the applicant fit for seafaring

FIT FOR SEAFARING

The applicant used aids to vision to meet a satisfactory standard Yes ☐ No ☒

Date of last colour vision test if not tested at this examination

The applicant used aids to hearing to meet a satisfactory standard Yes ☐ No ☒

Date of examination 17, 04, 2023 Place of examination DARESSALAAM

Name of Approved Medical Practitioner DR CHARLES K. OTITO Official Stamp

Signature of Approved Medical Practitioner

Expiry date of Certificate 16, 04, 2025  
(day/month/year)



I acknowledge that I have been advised on the content of the medical examination form.

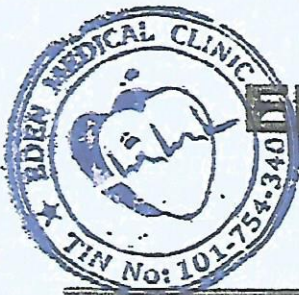
Applicant's signature E. Anangisye

EDEN MEDICAL CLINIC  
Dr. Charles K. Otito, MD, MMED  
Community Health Consultant  
P.O. Box 65202, Dar es Salaam  
MAYUNO HOUSE, Azikiwe Street

The original of this Certificate is given to the applicant. A copy is to be provided to TASAC. The Approved Medical Practitioner may retain a copy.

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

Please complete this questionnaire prior to attendance, but leave blank the answer to any question you do not understand. You must bring a suitable means of identification (passport, certificate of competence, driving license) with you to the examination.



# EDEN MEDICAL CLINIC

MAYUNO HOUSE, AZIKIWE ROAD

P.O. BOX 65202, TEL. 0713-321426

DAR ES SALAAM

## Seafarers Laboratory Investigation Form

Name: LUSEKELO NSEKELA ANANGISYE Age: 23 Sex: M/F

Card No: OP000 23 Requested by: DR OTITO

Diagnosis: NONE Specimen: Blu

### Clinical Finding:-

#### INVESTIGATION REQUESTED

Random blood glucose: <u>4.2mmol</u>	Urinalysis/ Urine
Fasting blood glucose:	Urobilinogen: <u>Normal</u>
HB Level: <u>14.5g/dl</u>	Glucose: <u>Neg</u>
ABO Blood Grouping: <u>O Rh+ve</u>	Bilirubin: <u>Neg</u>
HIV Test: <u>NEGATIVE</u>	Ketones: <u>Neg</u>
UPT:	S.Gravity: <u>1.030</u>
WEIGHT: <u>56KG</u>	Blood: <u>Neg</u>
HEIGHT: <u>164CM</u>	Protein: <u>Neg</u>
Visual Acuity (VISION)	PH: <u>6.0</u>
Speech/HEARING & Balance:	Nitrate: <u>Neg</u>
Blood Pressure: <u>103/65mmHg</u>	Leukocytes: <u>Neg</u>
Pulse Rate: <u>60/min</u>	MACR: <u>Yellowish colour stain</u>
Chest X-Ray-PA	MICR: <u>NIL</u>
ECG: ElectroCardiogram	

#### TO LABORATORY/EXRAY/ECG ECHO/EEG

Date: 17/4/2023

DR. Name & Signature: \_\_\_\_\_

NB: REPORT OVERLEAF

EDEN MEDICAL CLINIC  
Dr. Charles K. Otito, MD, MMED  
Community Health Consultant  
P.O. Box 65202, Dar es Salaam  
MAYUNO HOUSE, Azikiwa Street

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

**International Certificate of  
Vaccination or Prophylaxis**

*International Health Regulations (2005)*

**Certificat international de  
Vaccination ou de prophylaxie**

*Règlement sanitaire international (2005)*

**Issued to / Délivré à**

LUSTKELO NSTKELA ANANKE

**Passport number or travel document number  
Numero du passeport ou du document de voyage**

TAE - 477670

# INTERNATIONAL CERTIFICATE\* OF VACCINATION OR PROPHYLAXIS

This is to certify that [name] LUSEKELO  
 date of birth 04 FEB 1998 sex M  
 nationality TANZANIAN  
 national identification document, if applicable .....  
 whose signature follows ..... \*  
 has on the date indicated been vaccinated or received prophylaxis  
 against: (name of disease or condition)

YELLOW FEVER

in accordance with the International Health Regulations.

Vaccine or prophylaxis Vaccin ou agent prophylactique	Date	Signature and professional status of supervising clinician Signature et titre du clinicien responsable
1. <u>YELLOW</u>	<u>20-MAY</u>	<div style="border: 1px solid black; padding: 5px; text-align: center;">             NURSING OFFICER              IN CHARGE              VACCINATION CENTRE              DAR ES SALAAM           </div>
2. <u>FEVER</u>	<u>2022</u>	
3.		

\* Requirement for validity of certificate on page 2.

# CERTIFICAT\* INTERNATIONAL DE VACCINATION OU DE PROPHYLAXIE

Nous certifions que [nom] .....  
 né(e) le ..... de sexe .....  
 et de nationalité .....  
 document d'identification national, le cas échéant .....  
 dont la signature suit .....  
 a été vacciné(e) ou a reçu des agents prophylactiques à la date  
 indiquée contre: (nom de la maladie ou de l'affection)

conformément au Règlement sanitaire international.

Manufacturer and batch no. of vaccine or prophylaxis Fabricant du vaccin ou de l'agent prophylactique et numéro du lot	Certificate valid from: until: Certificat valable à partir du : jusqu'au :	Official stamp of the administering centre Cachet officiel du centre habilité
<u>SANOFI</u>	<u>2022</u>	<div style="border: 1px solid black; padding: 5px; text-align: center;">             NURSING OFFICER              IN CHARGE              VACCINATION CENTRE              DAR ES SALAAM           </div>
<u>PASTEUR</u>	<u>UNTIL</u>	
<u>N3064</u>	<u>FOR-LIFE</u>	

\* Voir les conditions de validité à la page 3.

UNITED REPUBLIC OF TANZANIA



MINISTRY OF HEALTH

CERTIFICATE OF COVID-19 VACCINATION

Lusekelo Nsekela Anangisye  
Full Name

IVD00025676733  
Ref Number

TAE'477670  
ID Number

Feb 4, 1998  
Date of Birth

Vaccine Name	Batch Number	Doses Administered	Date of Vaccination	Center of Vaccination
Pfizer-BioNTech	P0001324	<input checked="" type="checkbox"/> 1st Dose	Jan 10, 2023	KIGAMBONI Health Center
Pfizer-BioNTech	P0001324	<input checked="" type="checkbox"/> 2nd Dose	Jan 31, 2023	KIGAMBONI Health Center
Janssen	8003053	<input checked="" type="checkbox"/> 3rd Dose	Aug 17, 2023	KIGAMBONI Health Center

Scan to validate



ISSUED BY : Dr. Seif Shekalaghe

Permanent Secretary

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