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## APPLICATION FORM

1	Position	identity card PIN Number 5YSNTLL
,	Position Applied for:	Rating forming part of a navigational watch
	Date Available from:	-

**Personal Information** Gender: Male 2 First Name: ALI **Last Name: AGAYEV** Date of Birth: 09.01.1995 Place of Birth (City and Country): Azerbaijan, ASTARA Email:aliaqayev001@gmail.com Mobile Number: (+994) 55 285 22 89 Permanent Address: Astara district, Expected Salary Per Month: -Rudakanar street, Azerbaijan Nationality: Azerbaijan Alternative rank applying for: -Person to call in emergency: (+994) 99 774 54 23 Father

Family Details: (If Unmarried kindly give details of Father / Mother) Gender Relation First Name **Last Name** Contact Male Father Muslum Agayev 0 99 774 54 23

**Maritime Education** Type of degree or Name of school To **Country** From diploma IST Service Azerbaijan 04.2023 10.2023 Course Azerbaijan University of Azerbaijan 2015 2019 Bachelor Technology

**Physical Data** Height 170 Weight 70 **Boilersuit Size** L Shoes Size 41 A(II)RH+ Blood group Additional Physical Information: (You can write any other information you want to add about your physique in this field.)

6 Seamen's Book & Identify Docs

**DATE OF DOCUMENT** COUNTRY NUMBER **DATE OF ISSUE PLACE OF ISSUE 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** 

Seaman Book	Azerbaijan	DQK	026025	09.12.2023	Az	erbaijan	09.12.2028
Republic of Azerbaijan	Azerbaijan	C03	800683	12.09.2023	Az	erbaijan	11.09.2033
Certificate of Competency	Azerbaijan	RP	14012	01.12.2023	Az	erbaijan	-
Do you hold a US Vi	Do you hold a US Visa 'C1/D'?		NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Visa 'B1/B2'? YES/NO		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 re	easons		-			

7 Professional Test

<b>Professional Test Date</b>	Name of Test	Score
-	-	-

License

Name	Issuing Country	Place Issued	Valid Until
National endorsement of certificate of competency (if issued)	Azerbaijan	ASMA, BAKU	01.12.2023
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-3520-23	UAG	13.07.2023	13.06.2028
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-3520-23	UAG	13.07.2023	13.06.2028
ELEMENTARY FIRST AID	Azerbaijan	SO-3520-23	UAG	13.07.2023	13.06.2028
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-3520-23	UAG	13.07.2023	13.06.2028
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-3520-23	UAG	13.07.2023	13.06.2028
International Safety Management	Azerbaijan	SP-2374-23	UAG	1.07.2023	21.07.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2395-23	UAG	14.07.2023	19.06.2028
Security Awareness Training For All Seafarers	Azerbaijan	SI-2060-23	UAG	11.07.2023	14.06.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1986-23	UAG	27.07.2023	23.06.2028
Ship Security Officer	Azerbaijan	-	-	-	-
Leadership & Teamwork	Azerbaijan	-	-	-	-
Advanced Training in Fire Fighting	Azerbaijan	-	-	-	-
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0609-23	UAG	03.08.2023	03.08.2028

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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

## **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
DEEP BLUE SHIPPING	M/V JASIM	Saint Kitts &Nevis	General Cargo Ship	5263	-	2998		Ordinary Seaman	02.04.2024	04.10.2024	6 months	End of Contract
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Generators	-					
Purifiers and Boilers						
Type of Cranes / No of Reefer Containers	-					
Other Experience	1					
-						
Travel Documents						
Name		YES/NO	Country	Da	te pf Exp	oire
Schengen		YES/NO	NO NO		-	
US China		YES/NO YES/NO	NO			
Australia		YES/NO	NO		-	
1 165/Hullu		. 23/110				
Insurance, Health Related	Documentation					
Medical Certificate (Fit for D	Outy)			YES/NO	)	Y
	Outy)	Vaccina	ition			
Yellow Fever	Outy)	Vaccina	tion	YES/NO	)	1
Yellow Fever COVID-19				YES/NO	)	Y N Y
Yellow Fever				YES/NO	)	١
Yellow Fever COVID-19 answer is YES to any of the				YES/NO	)	١
Yellow Fever COVID-19 answer is YES to any of the	e above, please give	e full details and atta		YES/NO YES/NO necessary)	0	Y
Yellow Fever COVID-19 answer is YES to any of the Medical history Have you ever signed off a	e above, please give	e full details and atta		YES/NOnecessary)		Y
Yellow Fever COVID-19 answer is YES to any of the	e above, please give	e full details and atta	ach a separate page if r	YES/NO YES/NO necessary)		11 Y
Yellow Fever COVID-19 answer is YES to any of the Medical history Have you ever signed off a Have you undergone any o	ship due to medical peration in the past or during the last 12	e full details and atta	ach a separate page if r	YES/NO YES/NO necessary)		Y
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16	References (Please give the n	ame and address of your current or immediate pa	ast employer)
Ī	Name of company	4	

Name of company	1	2
Name of person to contact	-	-
Address	-	-
☎ 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.

Signature

Date:	21.01.2025

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