

NYANGA FRIDAY

Address: Okocha by Casca Street, Rumuolumeni Rivers State Port Harcourt

Phone: + (234)7050 483 + (234) 719,706 463 5686

Email: nyanga.friday@yahoo.com

CAREER OBJECTIVES:

To add value to the work process by brings my training and experience to work. Through a harmonious work relationship with my colleagues towards the realization of the organization goal.

BIO DATA:

Date of Birth:	15 th January, 1992
Sex:	Male
Marital Status:	Married
L.G.A:	Andoni
State of Origin:	Rivers State
Nationality:	Nigerian
Religion:	Christianity

SKILLS

- Seafarer

EDUCATIONAL QUALIFICATION

Community Primary school, AYAMA	1999-2003
First School Leaving Certificate	

COMMUNITY SECONDARY SCHOOL, EKEDE	2004-2010
West African Examination Council (WAEC)	

MARITIME ACADEMICY OF NIGERIA	2010-2012
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CHARKIN MARITIME SAFETY CENTRE	2015-2016
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CONARINA SCHOOL OF MARITIME AND TRANSPORT TECHNOLOGY	2019-2020
CERTIFICATE OF COMPETENCY	2013

MARINE QUALFICATION

- Certificate of Competency
- Certificate OF Proficiency IN Watch Keeping
- Associate Certificate in Nautical Science
- Efficient Deck Hand
- STCW Basic Safety Training
- Oil Tanker Familiarization Certificate
- Certificate OF Proficiency IN Survival Craft AND Rescue Boats (Other Than Fast Rescue Boat)
- H.U.E.T (OPITO)
- Proficiency in Survival Craft, Rescue Boats and Fast Rescue Boats
- I.S.P.S (Security Awareness)
- Human Element, Leadership and Management

- Bridge Resource Management
- International Safety Management
- Ship Security Officer
- Medical Care
- Advanced Fire Fighting
- Electronic Chart Display and Information System (operational level)
- Seaman record book (discharge book)
- International passport
- Liberal passport
- Yellow card
- Seafarers Medical Certificate
- Environmental Compliance and Commitment

WORK EXPERIENCE

ORON MARINE (2012-2013)

Position: DECK cadet

OIL INDUSTRY SERVICES (2013-2014)

Position: ABLE SEAMAN

OCEAN DEEP (2014-2015)

Position: ABLE SEAMAN

THOME OFFSHORE (2015-2017)

Position: ABLE SEAMAN

OSM (MV HERMIT BARON) (2017-2022)

Position: ABLE SEAMAN

JEPP DYNAMIC CONTRACTORS LIMITED (MV PRINCESS ZENNITA) (2022-2023)

Position: SECOND OFFICER

THOME OFFSHORE/OSM (MV NIGER DELTA KING) (2023-2024)

Position: SECOND OFFICER

HOBBIES

- Sport and Navigation

REFERENCES

MARTHA FRIDAY

+ (234) 905 870 4128

CHIEF OTUYOK

+ (234) 803 884 8423

MR. JAMES

+ (234) 806 442 7351



NIMASA

CERTIFICATE OF COMPETENCY

NOTES

1. The original of this Certificate must be kept available in accordance with regulation 1/2 of paragraph 9 of the Convention while serving on a ship.
2. Attention is drawn to provisions of the law whereby fraudulent use, forgery or alteration of this document could constitute a criminal offence.
3. Any person finding this document should send it to:
Director,
Maritime Safety & Seafarers Standards
NIMASA
4 Burma Road, Apapa, Lagos, Nigeria.
Postage will be paid by the addressee.
4. The validity of this certificate can be checked during office hours by contacting the Director, Maritime Safety & Seafarers Standards, NIMASA, 4 Burma Road, Apapa, Lagos, Nigeria.

Tel: +234 (0) 16309590
+234 (0) 9076361503

Email: msssd@nimasa.gov.ng
cocadmin@nimasa.gov.ng

008547

PARTICULARS OF HOLDER OF THE CERTIFICATE

NAME: **NYANGA FRIDAY NYANGA**

NAME:

PLACE OF BIRTH:

AYAMA EKEDE

DATE OF BIRTH:

15-JAN-1992

SIGNATURE OF HOLDER
OF THE CERTIFICATE:



008547



MERCHANT SHIPPING ACT

**MERCHANT SHIPPING
(TRAINING AND CERTIFICATION OF SEAFARERS)
REGULATION 2008, AS AMENDED**

CERTIFICATE OF COMPETENCY

No. **008547**

This certificate, as enclosed herein, has been issued to:

NYANGA FRIDAY NYANGA

who is entitled under the Merchant Shipping Act to serve in the capacity of

Officer in charge of Navigational Watch

in a Merchant Motorship requiring a certificate of competency of that class
in accordance with the above Regulation.

This certificate is subject to appropriate validity or endorsement contain
herein as to its limitations, exclusions, or additional qualifications.


SIGNATURE OF DULY AUTHORISED OFFICIAL

DR. BASHIR JAMOH

NAME OF DULY AUTHORISED OFFICIAL

008547

2

**CERTIFICATE ISSUED UNDER THE PROVISIONS OF THE
INTERNATIONAL CONVENTION ON STANDARDS OF TRAINING,
CERTIFICATION, AND WATCHKEEPING FOR SEAFARERS 1978,
AS AMENDED**

008547
CERTIFICATE No.

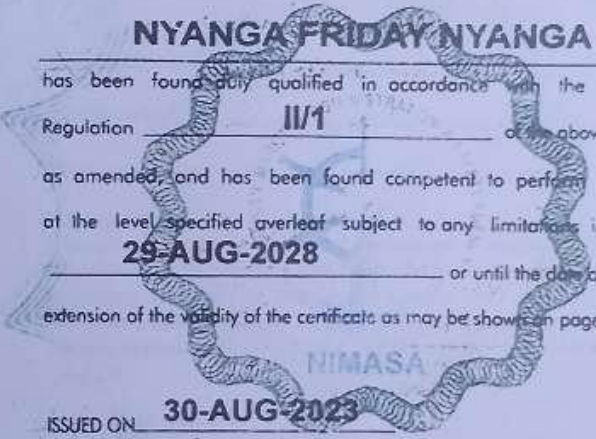
The Government of Federal Republic of Nigeria certifies that


NYANGA FRIDAY NYANGA

has been found duly qualified in accordance with the provisions of
Regulation **II/1** of the above Convention.

as amended, and has been found competent to perform the functions,
at the level specified overleaf subject to any limitations indicated until
29-AUG-2028

or until the date of expiry of any
extension of the validity of the certificate as may be shown on page 6.


ISSUED ON **30-AUG-2023**


SIGNATURE OF DULY AUTHORISED OFFICIAL

DR. BASHIR JAMOH

NAME OF DULY AUTHORISED OFFICIAL

008547

3

FUNCTIONS *	LEVEL *	LIMITATIONS APPLYING * (IF ANY) <small>Not valid for service on tankers at management level unless endorsed on page 12</small>
1	0	<3000GT NCV
2		
3		
7		

* See page 13

The lawful holder of this certificate may serve in the following capacity or the capacities specified in the safe manning regulations.

CAPACITY	LIMITATIONS APPLYING (IF ANY)
OOW	<3000GT NCV

008547



**ENDORSEMENT ATTESTING THE RECOGNITION OF A
CERTIFICATE OF COMPETENCY ISSUED UNDER THE PROVISIONS
OF THE INTERNATIONAL CONVENTION ON STANDARDS OF
TRAINING, CERTIFICATION AND WATCHKEEPING FOR
SEAFARERS 1978, AS AMENDED**

The Government of _____ Certifies that this
Certificate No. _____ issued to _____

by or on behalf of the Government of _____ is duly
recognised in accordance with the provisions of regulation 10 of the above
Convention, as amended, and the lawful holder is authorised to perform the
following functions at the levels specified on page 4, subject to any
limitations indicated, until _____ or until the date of expiry
of any extension of the validity of this endorsement as may be shown on
page 6

ISSUED ON _____

SIGNATURE OF DULY AUTHORISED OFFICIAL _____

NAME OF DULY AUTHORISED OFFICIAL _____

008547

NIG- 047485

DECLARATION

I DECLARE:

- (i) that the person to whom this Discharge Book relates has Satisfied me that he (she) is a seaman; and
(ii) that the photograph affixed bearing my official stamp is a true likeness of that person, that the signature within is his (her) true signature, that he (she) possesses the physical characteristics entered within and has stated to me the date and Place of his (her) birth as entered within.



NIG - 047485

Shipping Masters Embossing Stamp



NIG- 047485

PARTICULARS OF SEAMAN

SURNAME (in block letters)

NYANGA

OTHER NAMES (in full)

FRIDAY NYANGA

Date of Birth

15-01-92

Place of Birth

AYAMA EKE

Height

1.67m

Colour of Eyes

BROWN

Roller Thumb Print Impressions

Left Thumb



Right Thumb



Signature of Seaman

NIG- 047485

NIG- 047485

CERTIFICATES OF DISCHARGE

Compiled from list of Crew and Official Log Book or from other Official Records
and copy of Report of Character if desired by the Seaman

No.	Name of Ship Official Number Gross Tonnage and Home Port	Date and place of		Rating	Description of voyage**	Copy of Report of Character		Signature of Master and Seaman (if desired)
		Engagement *	Discharge			For ability	For general conduct	
1	MT CAPT GREGORY OFF NO: 111619 GRT 75586	28 MAY 15 LAGOS	14 Jan 16 Lagos	D/C	1 W.W.	VERY GOOD	V.G.	(1)  (2) 
2	MT ADELPHI OFF NO: 111619 GRT 75586	20 Jan 16 LAGOS	30 MAY 16 LAGOS	O/C	2 W.W.	VERY GOOD	V.G.	(1)  (2) 
3	MT. RISI MASTER DATE 5/8/16	15 Aug 16 Lagos	25 Jan 17 Port Harcourt A.B	W.W.	3 W.W.	VERY GOOD	VERY GOOD	(1)  (2) 
4		10 MAR 17 LAGOS	25 JUL 17 LAGOS	BOSUN	4 NCV	V.G.	V.G.	(1)  (2) 
5		28 FEB 17 Cotonou		BOSUN	5 NCV	VERY GOOD	VERY GOOD	(1)  (2) 
6					6			(1)  (2) 

* These columns are to be filled in at the time of engagement.

** FGN = Foreign Going
NCV = Near Coastal voyages

NIG- 047485

CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records and copy of Report of Character if desired by the Seaman.

No	* Name of Ship Official Number Gross Tonnage Home Port	* Date and place of		* Rating
		Engagement *	Discharge	
	SHIP'S NAME : DELTA SKY OFFICIAL NO. : 3881 D NO. : 9579717 U. SIGN/SHIP : V7TT5/3924 T/NRT 8 : 1528/458 RT OF REGISTRY : MAJURO	10/04/18 Lagos	09/07/18 Lagos	A/B
		05/08/18 Lagos	04/11/18 Lagos	A/B
9	MV OCEAN TREASURE IMO : 8443894 GRT : 12042	05/01/19 Lagos		A/B
10	CALL SIGN : V7X78 SIGN ON :  MASTER SIGN : 		LAGOS	A/B
11	MV OCEAN TREASURE IMO : 8443894 GRT : 12042	07/03/19 LAGOS		A/B
12	.. SIGN : V7X78 08/10/19		LAGOS	A/B

* These columns are to be filled in at the time of engagement.

NIG- 047485

* Description of voyage**	Copy of Report of Character		Signature of (1) master and of (2) Shipping Master and official stamp
	For ability	For general conduct	
7 NCV	VERY GOOD	VERY GOOD	(1)  (2) 
8 NCV	VERY GOOD	VERY GOOD	(1)  (2) 
9 FGN	VERY GOOD	VERY GOOD	(1)  (2) 
10 FGN	VERY GOOD	VERY GOOD	(1)  (2) 
11 NCV	VERY GOOD	VERY GOOD	(1)  (2) 
12 NCV	VERY GOOD	VERY GOOD	(1)  (2) 

** FGN = Foreign Going
NCV = Near Coastal Voyages

NIG- 047485

CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records, and copy of Report of Character if desired by the Seaman

No	* Name of Ship Official Number Gross Tonnage Port of Registry	Date and place of		* Rating
		Engagement *	Discharge	
13	CASTAL LEOPARD IMO No.: 34868917 IMO No.: 8527363 GRT: 259 NRT: 1280*2 PORT: FUNAFUTI	28.12.19 LAGOS	10.01.2020 LAGOS	A/B
14		11.01.20 ONNE Port	01.07.20 ONNE FLT.	AB
15	MY HERMIT BARON IMO: 3427744 GRT: 2328 NRT: 12236 FLAG: LIBERIA	14/8/20 FLT. Port	02/12/20 ONNE Port	A/B
16	MY HERMIT BARON IMO: 3427744 GRT: 2328 NRT: 12236 FLAG: LIBERIA	07.03.21 ONNE Port	11/04/2021 ONNE Port	A/B
17	MY HERMIT BARON IMO: 3427744 GRT: 2328 NRT: 12236 FLAG: LIBERIA	11/07/21 ONNE Port	22.10.2021 ONNE Port	AB
18	MY HERMIT BARON IMO: 3427744 GRT: 2328 NRT: 12236 FLAG: LIBERIA	26.01.2022 ONNE Port	23.05.2022 ONNE Port	A/B

* These columns are to be filled in at the time of engagement.

NIG- 047485

* Description of voyage**	Copy of Report of Character		Signature of (1) master and of (2) Shipping Master and official stamp
	For	For	
13 NCV	VERY GOOD 427	VERY GOOD 427	(1) [Signature] (2) [Signature]
14 F-G	VERY GOOD 427	VERY GOOD 427	(1) [Signature] (2) [Signature]
15 UNLIMITED	VERY GOOD 427	VERY GOOD 427	(1) [Signature] (2) [Signature]
16 F-GU	VERY GOOD 427	VERY GOOD 427	(1) [Signature] (2) [Signature]
17 F-GU	VERY GOOD 427	VERY GOOD 427	(1) [Signature] (2) [Signature]
18 F-GU	VERY GOOD 427	VERY GOOD 427	(1) [Signature] (2) [Signature]

** FGN = Foreign Going
NCV = Near Coastal Voyages

NIG- 047485

CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records, and copy of Report of Character if desired by the Seaman

No	* Name of Ship Official Number Gross Tonnage	Date and place of		* Rating
		Engagement *	Discharge	
19	ONNE Port. - Gabon	21.08.2022	10.01.2023	AB
20	PORT GENTIL GABON	29.01.2023	01-06-23	AB
21	Port Gentil Gabon	01.08.2023	10.4.23	AB
22	AYALA FIELD	11.01.24	07.05.24	2ND OFFICER
23	ONNE PORT	21.05.24	21.06.24	2ND OFFICER
24	ONNE PORT	30.06.24	11.08.24	2ND OFFICER

* These columns are to be filled in at the time of engagement.

12

NIG- 047485

* Description of voyage**	Copy of Report of Character		Signature of (1) master, and of (2) Shipping Master and official stamp
	for	for	
19 FCN	VERY GOOD	VERY GOOD	(1) V. HERMIT (2) 11/13/23
20 FCN	VERY GOOD	VERY GOOD	(1) 11/13/23 (2) 11/13/23
21 FCN	V.G	V.G	(1) 11/13/23 (2) 11/13/23
22 NCV	V.G	V.G	(1) 11/13/23 (2) 11/13/23
23 FCN	V.G	V.G	(1) 11/13/23 (2) 11/13/23
24 FCN	V.G	V.G	(1) 11/13/23 (2) 11/13/23

** FCN = Foreign Going
NCV = Near Coastal Voyages

MASTER

13

CERTIFICATES OF DISCHARGE

Completed from List of Crew and Official Log Book or from other Official Records, and copy of Report of Character if desired by the Seaman

NO	SHIP NAME NIGER DELTA KING	Date and place of		* Rating
		Engagement *	Discharge	
25	POB: LAGOS IMO NO: 9413212 CIS: 5NWF GRT: 3601 BHP: 4642KW	20.9.24 SOUTH AFRICA	03.10.24 SOUTH AFRICA	2ND OFFICER
26				
27				
28				
29				
30				

* Basic columns are to be filled in at the time of engagement

NIG- 047485

* Description of voyage**	Copy of Report of Character		NIGER DELTA KING signature of master and of (2) Shipping master and official company
	for ability	for general conduct	
25 FGN V.G	V.G	V.G	(1)  (2) MASTER.7
26			(1) (2)
27			(1) (2)
28			(1) (2)
29			(1) (2)
30			(1) (2)

** FGN = Foreign Going
NCV = Near Coastal Voyages

Protection contre le paludisme

Le paludisme, est une maladie grave, parfois mortelle, qui sevit encore à l'état endémique dans un très grand nombre des pays tropicaux et subtropicaux. Vous devez vous protéger contre les piqûres des moustiques (usage de moustiquaires imprégnées, répulsifs). En outre, les médicaments antipaludiques peuvent être utiles, soient pris régulièrement à titre préventif soient tenus en réserve. Pour le traitement d'urgence d'une fièvre causée par les parasites, les médicaments sont variables et changeants, veuillez consulter votre médecin ou l'institution spécialisée la plus proche, ou encore la dernière édition de la brochure de l'OMS ainsi qu'avoir les certificats de vaccination exigés et conseils d'hygiène pour les voyages internationaux.

Si vous prenez des médicaments antipaludiques à titre préventif, il est nécessaire de les prendre de façon absolument régulière, de préférence pendant ou immédiatement après un repas plutôt par intermittence, et de continuer pendant les six semaines suivantes.

Aucune méthode ne peut garantir une protection complète. Si une fièvre se déclare entre une semaine après la première exposition et jusqu'à deux ans après votre arrivée, ne négligez pas de consulter votre médecin et de l'informer de votre séjour dans une région malarieuse.

FEDERAL REPUBLIC OF NIGERIA



INTERNATIONAL CERTIFICATE OF VACCINATION OR PROPHYLAXIS CERTIFICAT INTERNATIONAL DE VACCINATION OU DE PROPHYLAXIE

Issued to / Délivré à

NYANGA
FRIDAY NYANGA

Passport No. or Travel Document No.

Numéro du passeport ou de la pièce justificative

A10300944

INTERNATIONAL HEALTH REGULATIONS (2005)
RÈGLEMENT SANITAIRE INTERNATIONAL (2005)



(Scan QR Code
to verify)



A336672

CHARKIN MARITIME SAFETY CENTRE

RIVERS STATE UNIVERSITY OF SCIENCE AND TECHNOLOGY CAMPUS
PORT HARCOURT - NIGERIA. Website: www.charkingroup.com



Certificate of Training

Charkin Maritime Safety Centre Certifies that



NYANGA FRIDAY NYANGA

Date of Birth 15TH JAN., 1992 Place of Birth AYAMA EKEDE

Has successfully completed the following course

EFFICIENT DECK HAND

From 1ST FEB., 2016

HOD



To 5TH FEB., 2016

CEO/ MD

5TH FEB., 2016

Date of Issue

CMSC ED/ 007208
CERT.



CONARINA SCHOOL OF MARITIME AND TRANSPORT TECHNOLOGY

Eseme River Road, Oria-Abraka, Delta State, Nigeria
Website: www.conarinamaritimeacademy.com.ng
E-mail: conarina_maritime_academy@yahoo.com

Certify that



NYANGA FRIDAY NYANGA

COURSE TIMETABLE: CT/06/01/1720

CERTIFICATE NO.: CSMTT/18/017236

REGISTER CODE: CSMTT/ACNS/1720/0236/2020

PLACE AND DATE OF BIRTH: NIGERIA 15/01/1992

DISCHARGE NO.: NIG-047485

Has Satisfactorily Attended Course

ASSOCIATE CERTIFICATE IN NAUTICAL SCIENCE

This course fulfills minimum standard of competency of officer in charge of navigational watch in accordance with regulation II/1 chapter II, section II/1, paragraph 2, Table A-II/1 of the IMO international convention of standard of training, certificate and watch keeping for seafarers, STCW 2010 as amended.

IMO model course 7.03

Signature of 
Signature of 



Date of Issue: 14th Dec, 2020

Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State www.maritimeacademy.gov.ng

Certificate of Completion ELECTRONIC CHART DISPLAY AND INFORMATION SYSTEM (OPERATIONAL LEVEL)

No. **22093**

This is to certify that

Nyanga Friday Nyanga

Born on ***15th Jan, 1992***

Discharge Book No ***Nig-047485***

has successfully completed an approved training in:

ELECTRONIC CHART DISPLAY AND INFORMATION SYSTEM (OPERATIONAL LEVEL)

Held from ***29th Jan,*** to ***2nd Feb, 2024***

This course satisfies the requirements of Regulation II/1, Section A-II/1, Table A-II/1 and Section A-I/12 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention), as amended in 2010 and its code. The course is based on the guidance given in the IMO Model Course 1.27 (Operational Use of ECDIS).

This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)



Isaac G. Sani

Instructor

[Signature]
Rector



[Signature]

Holder

2nd Feb, 2024
Date

*This Certificate is not valid without the Academy's Official Seal

Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State www.maritimeacademy.gov.ng

Certificate of Completion GLOBAL MARITIME DISTRESS AND SAFETY SYSTEM GENERAL OPERATORS CERTIFICATE (GOC) COURSE

No. **25165**

This is to certify that

Nyanga Friday Nyanga

Born on

15th Jan, 1992

Discharge Book No.

N14-047485

has successfully completed an approved training in:

GLOBAL MARITIME DISTRESS AND SAFETY SYSTEM GENERAL OPERATORS CERTIFICATE (GOC) COURSE

Held from

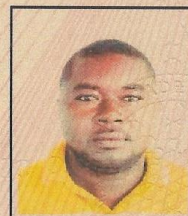
14th

to

29th Oct, 2024

This course meets the requirements of Regulation IV/2 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention), as amended in 2010 and Section A-IV/2 and Table A-IV/2 of the STCW Code. This course is based on the IMO Model Course 1.25.

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).



[Signature]

Instructor

Rector



[Signature]

Holder

29th Oct, 2024

Date

**This Certificate is not valid without the Academy's Official Seal*

MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Enerhen, Delta State, Nigeria. Tel: +234-8021122189, 08054722786



MRT/HELM/2291/2023
Certificate Number

This is to certify that

NYANGA FRIDAY NYANGA

Has successfully completed an approved training in:

HUMAN ELEMENT, LEADERSHIP AND MANAGEMENT

In accordance with the IMO Model Course 1:39, Column 2 of Tables A-II/1, A-III/1, A-II/2, A-III/2 and A-III/6 of the revised STCW 2010

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)

Signature of Instructor

Issue Date
06/12/2023


Signature of Holder

Email: info@marimared.com | website: www.marimared.com



MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Enerhen, Delta State, Nigeria, Tel: +234-8021122189, 08054722786



MRT/BRM/1557/2023
Certificate Number

This is to certify that

NYANGA FRIDAY NYANGA

Has successfully completed an approved training in:

BRIDGE RESOURCE MANAGEMENT

The course is conducted in accordance with guidelines given in the IMO Model Course 1.22 and fulfills the training requirements for competencies stated in

Section A-II/1 & A-II/2, Table A-II/1 & Table A-II/2 of the Revised STCW Convention (2010)

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)


Signature of Instructor

Issue Date
08/12/2023




Signature of Holder



MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Enerhen, Delta State, Nigeria. Tell: +234-8021122189, 08054722786



MRT/ISM/1521/2023
Certificate Number

CERTIFICATE OF TRAINING IN INTERNATIONAL SAFETY MANAGEMENT (ISM) CODE

This is to certify that

NYANGA FRIDAY NYANGA

Date of Birth: 15/01/1992

Has successfully completed an approved training in:

International Safety Management

In accordance with the requirements of Chapter 1x of the International Convention for the Safety of Life at Sea SOLAS 1974 as amended in 2010.

This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)

Signature of Instructor



Issue Date
27/11/2023



Signature of Holder



Email: info@marimared.com | website: www.marimared.com

MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Oloibo Avenue, off Effurun Super Road Eneken, Delta State, Nigeria. Tel: +234-8021122189, 08054722786



MRI/SSO/2167/2023
Certificate Number

Certificate of Proficiency as Ship Security Officer

This is to certify that

NYANGA FRIDAY NYANGA

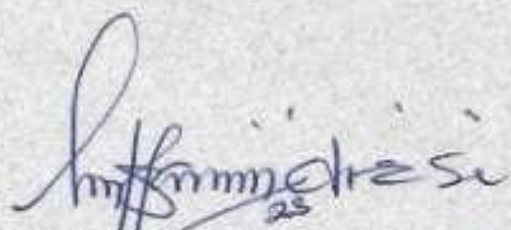
Date of Birth: 15/01/1992

Has successfully completed an approved training in:

Ship Security Officer

In accordance with section A/2.1.6 (and section A/12) of the ISPS Code and in section A-VI/5 of the STCW Code, as amended

This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).


Signature of Instructor



Issue Date
29/11/2023




Signature of Holder



Email: info@marimared.com | website: www.marimared.com

MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Ekerhen, Delta State, Nigeria. Tel: +234-8021122189,
08054722786



MRT/MC/354/2023
Certificate Number

This is to certify that

NYANGA FRIDAY NYANGA

Has successfully completed an approved training in:

MEDICAL CARE

Has successfully completed a training in MEDICAL CARE, and has met the standard of competence as specified in Section A-VI/4, paragraph 4-6, Table A-VI/4-2 of the Revised STCW Convention (2010).

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)

Signature of Instructor

Issue Date
04/12/2023

Signature of Holder



Email: info@marimared.com | website: www.marimared.com

MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Enerhen, Delta State. Tell: +234-8021122189, 08054722786



MRT/AFF/2982/2023
Certificate Number

Certificate of Proficiency in Advanced Fire Fighting

This is to certify that

NYANGA FRIDAY NYANGA

Date of Birth: 15/01/1992

Has successfully completed an approved training in:

ADVANCED FIRE FIGHTING

Regulation VI/3 and Section A-VI/3, Paragraphs 1 to 4

of international Convention on Standards of Training, Certificate and Watchkeeping for Seafarers, STCW 1978 as amended in 2010

This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)

Signature of Instructor

Issue Date
01/12/2023

Signature of Holder



Email: info@marimared.com | website: www.marimared.com



CHARKIN

www.charkincentre.com



Certificate Number CM050822300601

Certificate of Training

This is to certify that

NYANGA FRIDAY NYANGA

Date of Birth: 15-01-1992

Has Successfully Completed



PROFICIENCY IN SURVIVAL CRAFT, RESCUE BOATS AND FAST RESCUE BOATS

And has met the standard of Competence as specified in SECTION A-VI/2, paragraph 7-12, Table A-VI/2-2 of the STCW Convention as amended (including 2010 amendments)

30-06-2022

Issue Date



SIGNATURE OF INSTRUCTOR

29-06-2027

Expiry Date



CHARKIN

www.charkincentre.com



Certificate Number CM242222090605

Certificate of Training

This is to certify that

NYANGA FRIDAY NYANGA

Date of Birth: 15-01-1992

Has Successfully Completed



STCW BASIC SAFETY TRAINING

*Has met the Standard of competence as specified in the STCW Convention as amended
(including 2010 amendments) and has met the requirements laid down in*

Personal Survival techniques; Section A-VII, Table A-VII-1

Fire Prevention and Fire Fighting; Section A-VII, Table A-VII-2

Elementary First Aid; Section A-VII, Table A-VII-3

Personal Safety and Social Responsibilities; Section A-VII, Table A-VII-4

09-06-2022

Issue Date



SIGNATURE OF INSTRUCTOR

08-06-2027

Expiry Date

0016268

CHARKIN MARITIME SAFETY CENTRE

RIVERS STATE UNIVERSITY OF SCIENCE AND TECHNOLOGY CAMPUS
PORT HARCOURT - NIGERIA. Website: www.charkingroup.com



Certificate of Training

Charkin Maritime Safety Centre Certifies that



NYANGA FRIDAY NYANGA

Date of Birth 15TH JAN., 1992 Place of Birth AYAMA EKEDE

Has successfully completed the following course

EFFICIENT DECK HAND

From 1ST FEB., 2016

HOD



To 5TH FEB., 2016

CEO/ MD

5TH FEB., 2016

Date of Issue

CMSC ED/ 007208
CERT.



CERTIFICATE OF COMPLETION

Certificate Number : ECC - mmwd8JK1dE

This certifies that

Friday Nyanga NYANGA

has successfully completed the video

Environmental Compliance and Commitment

June 17, 2020

OSM

MARITIME LEADERS
ACADEMY


ADRIEN JESUS LUNTAO
Director, Seafarer Competence and Training

**NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY
(NIMASA)**



CERT NO. **NAB.NAV.2508**

CERTIFICATE OF PROFICIENCY

This is to certify that **NYANGA FRIDAY NYANGA** is qualified as **Able**
Seafarer deck in accordance with provisions of **Regulation II/5** of the
International Convention on Standards of Training, Certification and Watchkeeping for
Seafarers 1978 (STCW) and as amended

The holder of this certificate is entitled under the Merchant Shipping Act to serve in a ship
requiring certificate of that designation

The certificate of proficiency is subject to endorsements as to any additional requirement
in accordance with the above regulations



Photograph of holder of Certificate

Date of birth of Certificate holder: **15-Jan-92**

Date of issue: **30/05/2019**

Signature of holder of Certificate:

Signature of Authorized official:
CAPT. SUNDAY M. UMOREN



ANDONI LOCAL GOVERNMENT AREA RIVERS STATE OF NIGERIA

Certificate Of Identification/ Origin

This is To Certify That

The bearer: NYANGA FRIDAY NYANGA

is an indigence/ a native of AYAMA EKEDE TOWN

Andoni Local Government Area, Rivers State, Nigeria.

This Certificate covers his her identification as such

You are pleased requested to give him/her every necessary assistance



Fee N 500.00 Paid on R.C.R. No 1012594

Dated this 14TH day of FEB. 20 12

ELD. (HON) SAMPSON GILBERT EGOR
VICE CHAIRMAN.

Authorizing Officer

The West African Examinations Council

West African Senior School Certificate

JUNE 2012

This is to Certify that: **NYANGA FRIDAY NYANGA**

born on: **MAY 2, 1990**

sex: **MALE**

having been in attendance at

COMMUNITY SECONDARY SCHOOL, EKEDE-ANDONI

sat the West African Senior School Certificate Examination
and obtained the results shown below.



SUBJECT

GRADE

ECONOMICS	D7
GEOGRAPHY	B2
GOVERNMENT	B3
ENGLISH LANGUAGE	C5
MATHEMATICS	A1
AGRICULTURAL SCIENCE	C6
BIOLOGY	C6
PHYSICS	C4
SUBJECTS RECORDED	EIGHT

CD 20

Candidate No.
4331408063

Certificate No.

NGWASSCS 17428158



Chairman of Council

Registrar to Council



National Identity Management System

Federal Republic of Nigeria

National Identification Number Slip (NINS)



Tracking ID: 57Y00G2TH00027Y

Surname: NYANGA

Address:
14 ABUJA ROAD DSC

NIN: 48701641979

First Name: FRIDAY

Middle Name: NYANGA

Gender: M


WARRI
DT

Note: The **National Identification Number (NIN)** is your identity. It is confidential and may only be released for legitimate transactions.

You will be notified when your National Identity Card is ready (for any enquiries please contact)

 helpdesk@nimc.gov.ng

 www.nimc.gov.ng

 0700-CALL-NIMC
(0700-2255-646)

 National Identity Management Commission
11, Sokode Crescent, Off Dalaiba Street, Zone 5 Wuse, Abuja Nigeria

**NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY
(NIMASA)**



CERT NO. NRAT.NAV.8608

CERTIFICATE OF PROFICIENCY

This is to certify that **NYANGA FRIDAY NYANGA** is qualified as **Rating Forming**
Part of Navigational Watch in accordance with provisions of **Regulation II/4** of the
International Convention on Standards of Training, Certification and Watchkeeping for
Seafarers 1978 (STCW) and as amended

The holder of this certificate is entitled under the Merchant Shipping Act to serve in a
ship requiring certificate of that designation

The certificate of proficiency is subject to endorsements as to any additional requirement
in accordance with the above regulations



Photograph of holder of Certificate

Date of birth of Certificate holder: **15/01/92**

Date of issue: **15/02/2017**

Signature of holder of Certificate:

Signature of Authorized official:
CAPT. SUNDAY M. UMOREN



MARITIME ACADEMY OF NIGERIA

Knowledge & Service

No. 4, College Road, PM 81089, Oron, Akwa Ibom State, Nigeria
www.maritimeacademy.gov.ng, e-mail: info@maritimeacademy.gov.ng

GATE PASS

Identification Number: **13422**



Nyanga Friday Nyanga

Programme: SIMULATOR

Course: Global Maritime Distress and Safety System

(GMDSS) General Operators Certificate (GOC) Course

Training Type: FRESH

Duration: 12 Days

Effective date: 14-10-2024

Expire date: 26-10-2024



This GATE PASS is only valid for the duration of the course and must be surrendered to the Academic Affair Department at the end of the programme

Authorized Signature

***Note: Fees Not Refundable!**

Failure to Attend the training session on the selected date will result to the forfeiture of programme without refund.

BOOK 1526827 FV 1037920

ISSUED TO:			
LAST NYANGA			
FIRST, MI FRIDAY NYANGA			
BIRTH DATE	BIRTH PLACE		
15-JAN-92	AYAMA EKEDE, NIGERIA		
HAIR COLOR	HEIGHT	WEIGHT	SEX
BLACK	5 FT. 5 IN.	181 LBS.	M
EYE COLOR	EXPIRATION DATE		
BROWN	16-JUN-25		
DISTINGUISHING MARKS			
NONE			
ISSUE DATE	PLACE OF ISSUE		
16-JUN-20	OFFICE OF DEPUTY COMMISSIONER OF MARITIME POLICE, FEDERAL BUREAU OF INVESTIGATION, U.S.A.		

PAGE 2



Signature

SIGNATURE (NOT VALID UNLESS SIGNED BY BOARD)



Certificate Number: **4123**

MARITIME ACADEMY OF NIGERIA

P.M.B. 1089, ORON, AKWA IBOM STATE

(Established by Decree No 16 of 1988, now Cap M3 LFN, 2010)

CERTIFICATE OF PROFICIENCY IN SURVIVAL CRAFT AND RESCUE BOATS (OTHER THAN FAST RESCUE BOATS)

This is to certify that

Nyanga Friday Nyanga

Date of birth: **15th Jan, 1992**


Has successfully completed an approved training in:

**Proficiency in Survival Craft and Rescue
Boats (Other than Fast Rescue Boats)**


Regulation VI/2 and Section A-VI/2 (1-6)

of the International Convention on Standards of Training, Certification and
Watchkeeping for Seafarers, 1978 (STCW Convention) as amended.

This certificate is issued under the Authority of the Nigerian Maritime Administration
and Safety Agency (NIMASA).


SIGNATURE OF INSTRUCTOR




SIGNATURE OF HOLDER


RECTOR



DATE: **22nd March, 2019**

This Certificate is not valid without the Academy's Official Seal

MARITIME ACADEMY OF NIGERIA, ORON

Established by Decree No. 16 of 1988

(NOW CAP 217 LAWS OF THE FEDERATION OF NIGERIA, 1990)

MAN/OTF/NO: **2634**



Oil Tanker Familiarization Certificate

this Certificate is Awarded to

Name: **Nyanga Friday Nyanga**

Date of Birth: **15th January, 1992**

Nationality: **Nigerian**

having satisfactorily completed at the approved course of study at the Maritime Academy of Nigeria, Oron, in fulfillment of the requirements of Regulation V/I, paragraph 1.2 of the STCW Convention as amended in 1995.

From **16th Dec, 2013** To **20th Dec, 2013**

Dated this **20th** day of **December**, in the year **2013**

Registrar

Rector

This Certificate is not valid without the Academy's Official Seal



RC 971913

ONSHORE AND OFFSHORE SAFETY INSTITUTE

Certificate Of Training

This is to Certify that

NYANGA FRIDAY NYANGA

Has Demonstrated Academic Excellence With Distinction By Completing All Necessary Training, Academic Requirements In The ONSHORE AND OFFSHORE SAFETY INSTITUTE Professional Development Program.

This Achievement Demonstrates Commitment And Professionalism In The Following Course

HELICOPTER UNDERWATER ESCAPE TRAINING (HUET)

Includes Competence in:

- * Helicopter Rescue Techniques
- * Water Entry and Survival At Sea Techniques
- * Helicopter Underwater Escape Techniques
- * Fire Safety
- * Helicopter Orientation
- * Compressed Air emergency Breathing System (CA-EBS)



This Course satisfy the training requirements in accordance to the approved OPITO Standards of Training.

DIRECTOR OF TRAINING: SAMUEL SUCCESS

Date issued: 19th February, 2019
Valid Till : 19th February, 2023
Cert. Code: (HUET01903N)
HOURS. 96

INSTRUCTOR: IBIKARI SAMUEL

Verify Certificate: www.offshoresafetyinstitute.com

ONSHORE AND OFFSHORE SAFETY INSTITUTE
Suit 127c NIPOST Building, 10 Station Road by CBN, PH.
Tel: +234-8038855296, 09099887732, 08181645460
Email: offshoresafetyinstitute@gmail.com
website: www.offshoresafetyinstitute.com



CHARKIN MARITIME & OFFSHORE SAFETY CENTRE

PORT HARCOURT - NIGERIA. Website: www.charkingroup.com



Certificate of Training

This is to Certify that

NYANGA FRIDAY NYANGA

Has successfully completed a

Certificate of Proficiency for Seafarers with Security Awareness and Designated Security Duties

Training Course at

CHARKIN MARITIME & OFFSHORE SAFETY CENTRE

and has met the Standard of Competence as specified in **SECTION A-VI/6, Table A-VI/6-1, Table A-VI/6-2 of the Revised STCW (2010)**

CEO/MD

HOD

No. **SAT/06703**

CMOSC/SAT/08/16

4TH AUG. 2016

Date Issued



NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

TELEGRAM CABLES
MARITIME LAGOS
Tel: +234 701 925 6800, +234 813 041 0182
Fax: 5871329
Telex: 23891, NAMARI NG
Website: www.nimasa.gov.ng

MARITIME HOUSE
4 Burma Road
Apapa
P. M. B. 12861
Lagos.

NYANGA FRIDAY
14 DSC Abuja Road
White House Upstairs
Delta State
07050483719.

19th December, 2019

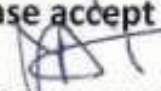
RE: APPLICATION FOR REGISTRATION STATUS AS A SEAFARER.

I am directed to acknowledge the receipt of your letter dated 8th March, 2019 on the above subject.

The Agency has processed your application and your registration details are as follows:

Name: NYANGA FRIDAY
Reg. No: N/DR/2320
Category: RATING FORMING PART OF NAVIGATIONAL WATCH
Status: REGISTERED

Please accept the assurances of our esteemed regards.


CHIROMA I. D. 19/12/19
Deputy Director Maritime Labour Services
For: Director – General.





FEDERAL REPUBLIC OF NIGERIA

220813

NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY



SEAFARER'S MEDICAL CERTIFICATE

(NIMASA)



ORIGINAL

This Certificate is issued by the Government of the Federal Republic of Nigeria in compliance with the requirement of Regulation 1.2 standard A 1.2 of the Maritime Labour Convention, 2006 (MLC '06), as amended and the International Convention on Standards for Training, Certification and Watch keeping for seafarers (STCW) 78 as amended.

Surname: <u>NYANCA</u>	Given Names: <u>FREDAY NYANCA</u>
Discharge Book No: <u>SSID NO: 19047485</u>	Passport No: <u>B50893906</u>
Date of Birth: <u>15/01/1992</u>	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Nationality: <u>NIGERIAN</u>	

Department: (Tick relevant box)	Rank: _____
Deck <input checked="" type="checkbox"/> Engine <input type="checkbox"/> Catering <input type="checkbox"/>	
Other (specify): _____	

Declaration of the recognised doctor

ID checked at the point of examination	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Hearing standards as in STCW A I/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Visual acuity standards as in STCW A-I/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Unaided Hearing satisfactory	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Color vision standards as in STCW A-I/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Is there any limitation or restriction on fitness?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of last colour vision test (dd/mm/yy): <u>8/05/24</u>	Please specify restriction: _____		
Visual Aids (tick if worn)			
Spectacles <input type="checkbox"/> Contact lenses <input type="checkbox"/>			

Restrictions

Duties:

Location/Vessel:

Medical/Others:

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons onboard?

Yes ☒ No ☐

I have examined the seafarer named above and have found him/her fit for seafaring as below

Medical Fitness Category (tick relevant box)

1. Fit-No Restriction ☒2. Fit-subject to restrictions ☐

Fit for look-out duty	Deck	Engine	Steward/Others
Fit <input type="checkbox"/> Unfit <input type="checkbox"/>	Fit <input checked="" type="checkbox"/> Unfit <input type="checkbox"/>	Fit <input type="checkbox"/> Unfit <input type="checkbox"/>	Fit <input type="checkbox"/> Unfit <input type="checkbox"/>

Date of Examination	DDMMYY	DDMMYY	DDMMYY
	<u>08/05/2024</u>	<u>08/05/2024</u>	<u>08/05/2024</u>

Declaration by Seafarer

I have read and understood the notes overleaf and declare that all answers provided are to the best of my knowledge true. I agree that by withholding any information vital to this medical examination will lead to cancellation and withdrawal of this certificate.

Signature of Seafarer: Now

Name, Signature and Official stamp/seal of Approved Doctor:

Sign.....
Dr. Henry A. M. Scia,
Medical Director
HARLEY CLINICS, P.H.



NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

SEAFARER'S MEDICAL EXAMINATION

PHYSICIAN'S EXAMINATION REPORT FOR SEAFARERS UNDER REGULATION 1.2, STANDARD A1.2, OF MLC 2006

Name: NYANGA FRIDAY NYANGA
(Surname first)

Discharge Book No: N/A 047485

APPEARANCE

NORMAL

GENERAL EXAMINATION

Weight: 96kg Height: 173cm Gait: ☒ Normal ☐ Abnormal
Temperature: 36.5°C Blood Pressure: 130/90 Pulse Rate: 84 bpm Pallor: NIL
Lymph Nodes: ☐ Palpable ☒ Impalpable If palpable, state region/location

SYSTEMIC EXAMINATION

- | | Normal | Abnormal |
|------------------------------------|-------------------------------------|--------------------------|
| (1.) Central Nervous System | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (2.) Cardiovascular System | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (3.) Respiratory System | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (4.) Gastrointestinal System | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (5.) Hernial Orifices | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (6.) Endocrine System | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (7.) Locomotor System | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (8.) Orodental | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (9.) Skin (Including Varicosities) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (10.) Ear, Nose & Throat | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

(3.) Eyesight

	RT	LT
Visual Acuity Without glasses	6/- 6/6	6/- 6/6
Visual Acuity With glasses	6/- 6/6	6/- 6/6
Colour Vision	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Abnormal

- (1.) Blood Group & Genotype Hb 4- per 42 WBC-6800
(2.) Full blood count N-69, L-31
(3.) VDRL ☒ Negative ☐ Positive
(4.) HIV ☒ Negative ☐ Positive
(5.) Hepatitis B Antigen ☒ Negative ☐ Positive
(6.) Widal (for Catering Dept) Normal (Tub)
(7.) Urinalysis NAD
(8.) Chest X-Ray with Report ☒ Normal ☐ Abnormal
(9.) Electrocardiogram ☒ Normal ☐ Abnormal

OTHER EXAMINATIONS

- | | Normal | Abnormal |
|-----------------------------------|-------------------------------------|--------------------------|
| (1.) Speech (Voice Communication) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (2.) Hearing | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| - Audiometry | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Dr Henry A. M. Sola
Physician's Name

Harley Clinic
Onoos, Pk
near the BIG Tree
080333 91509
07014177051
Physician's Address/Telephone No.

M. Sola
Physician's Signature & Stamp
Dr. Henry A. M. Sola
Medical Director
HARLEY CLINIC & PK



FEDERAL REPUBLIC OF NIGERIA
NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY
SEAFARER'S MEDICAL CERTIFICATION APPLICATION FORM
UNDER REGULATION 1.2, STANDARD A1.2, OF MLC 2006

A. APPLICANT'S BIODATA

SURNAME: NYANGA OTHER NAMES: FRIDAY NYANGA
DATE OF BIRTH: 15/01/92 AGE: 32 SEX: M NATIONALITY: NIGERIAN
DATE OF APPLICATION: 08/05/2024 PLACE OF BIRTH: AYAMA BRIDGE, ETAMA, RIVERS
Discharge Book NO.: NIG-017485 Company: _____ Vessel: _____
Address: NO 4 ABUJA RD, DSC, ABUJA, DELTA STATE
DEPT. OF SHIP: DECK ☒ ENGINE ☐ CATERING ☐ MASTER/MATE ☐ OTHERS SPECIFY: _____

B. APPLICANT'S MEDICAL HISTORY (under guidance from a medical personnel)

Have you ever had

- | | YES | NO | | YES | NO |
|---|-------------------------------------|-------------------------------------|---|--------------------------|-------------------------------------|
| (1.) Admission to hospital whatever reason at all in the past | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (16.) Sexually Transmitted Diseases (Gonorrhea, Syphilis, AIDS etc) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (2.) Any surgical operation | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (17.) Any persistent Muscular weakness | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (3.) Any accident | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (18.) Loss of consciousness | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (4.) Any mental illness | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (19.) Pain in spine, Back or any Joint | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (5.) Any convulsions | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (20.) Balance problem | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (6.) Any Ear or Hearing problem | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (21.) Anal pain or swelling | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (7.) Any persistent Cough | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (22.) Restricted mobility | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (8.) Difficulty with breathing or breathlessness on mild exertion | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (23.) Excessive thirst | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (9.) Palpitations | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (24.) A sign-off as sick or a repatriation from a ship? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (10.) High blood pressure | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (25.) Excessive weight loss | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (11.) Chest pain at rest or on exertion | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (26.) An unfit declaration for sea duty? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (12.) Stomach pain | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (27.) Sugar in the Urine | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (13.) Any vomiting | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (28.) Your medical certificate restricted or revoked? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (14.) Blood vomits or stool | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (29.) To wear contact Lens or Glasses | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (15.) Any problem passing urine | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (30.) To be placed on any medication | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

2. IMMUNIZATION HISTORY (Have you been immunized before)

(A.) Tetanus ☒ YES ☐ NO IF YES DATE 14/12 (B.) Typhoid Fever ☐ YES ☒ NO IF YES DATE _____ (C.) Cholera ☐ YES ☒ NO IF YES DATE _____ (D.) Meningitis ☒ YES ☐ NO IF YES DATE Jan 2020
(E.) Yellow Fever ☒ YES ☐ NO IF YES DATE Jan 2024 (F.) Hepatitis ☐ YES ☒ NO IF YES DATE _____ (G.) Tuberculosis ☒ YES ☐ NO IF YES DATE BCG @ R, rts

3. SOCIAL/FAMILY HISTORY

- (A.) Do you smoke, Take Alcohol or use drugs? ☐ YES ☒ NO
(B.) has any member of your family or relative had mental illness, Epilepsy, Blood disorder, Heart trouble, Hypertension or any other disorder (e.g. Allergy etc.) ☐ YES ☒ NO
(C.) Do you have a medical or other condition not mentioned above? ☐ YES ☒ NO
(D.) Others NIL

I, NYANGA FRIDAY NYANGA declare that the information given above is correct to the best of my knowledge. I consent to the examining doctor to enclose my medical information on the Medical fitness Certificate for official purposes (To be signed only in the presence of examining doctor)

8-5-2024
Date

NYANGA FRIDAY NYANGA
Name of Applicant

KDW
Signature of Applicant