


## CURRICULUM VITAE OF MR. SABRI FARAHANI SHAURI

Names	:	Sabri Farahani Shauri	
Rank	:	AB	
Place of birth	:	Kilombero	
Date of birth	:	03.12.1993	
Mobile phone	:	+255 772275997	
Email	:	<a href="mailto:sabrishauri15@gmail.com">sabrishauri15@gmail.com</a>	
Nationality	:	Tanzania	
Marital status	:	Single	
Professional education	:	Marine education	
Height/Weight	:	Kg 75/cm 171	
Blood group	:	O+	
Shoe size	:	43	
Overall size	:	XXL	

### NEXT OF KIN/EMERGENCY CONTACT

Name	:	Mwanakheri Ahmada Mfaume
Permanent address	:	Rahaleo – Zanzibar
Phone /Home	:	+255773426930
Relation	:	Mother

DOCUMENT TYPE	DOCUMENT NUMBER	COUNTRY	ISSUE PLACE	ISSUE DATE	EXP. DATE
Passport	TAE397194	Tanzania	PCO, Zanzibar	20.08.2021	19.08.2031
Previous seaman book	DB06043	Tanzania	Sumatra HQ dar salaam	10.04.2018	09.04.2023
New seaman book	ZMA-SDB230375	Tanzania	ZMA, Zanzibar	08.05.2023	09.12.2026
COVID-19 VACCINATION	Z52994457	Tanzania	Zanzibar	13.04.2022	NIL



MANDATORY CERTIFICATES	CERTIFICATE NUMBER	ISSUE DATE	EXPIRE DATE	AUTHORITY/ GOVERNMENT
FIRE PREVENTION AND FIRE FIGHTING	010905	07.10.2022	06.10.2027	TASAC
PERSONAL SURVIVAL TECHNIQUES	011660	30.09.2022	29.09.2027	TASAC
PERSONAL SAFETY AND SOCAIL RESPONSIBILITIES	011796	16.09.2022	15.09.2027	TASAC
ELEMENTARY FIRST AID	03796	16.09.2022	15.09.2027	TASAC
SECURITY AWARENESS TRAINING	09410	07.10.2022	NIL	TASAC
ABLE SEAFARER DECK	06454	10.02.2024	NIL	TASAC
RATING FORMING PART OF A NAVIGATIONAL WATCH	07178	07.01.2024	NIL	TASAC
PROFICIENCY IN SURVIVAL CRAFT & RESCUE BOATS	04998	07.01.2024	06.01.2029	TASAC
SEAFARER DESIGNATED SECURITY DUTIES	08551	20.04.2024	NIL	TASAC
BASIC TRAINING FOR OIL AND CHEMICAL TANKER CARGO OPERATIONS	06541	07.01.2024	NIL	TASAC
BASIC SAFETY TRAINING CERTIFICATE	DMI/BST/102 /078/09	15.05.2024	14.05.2029	DMI
HYDROGEN SULPHIDE SAFETY (H2S)	DMI/H2S/06 7/104/066	26.05.2024	25.05.2026	DMI

#### SEA SERVICES AS RECORDED IN THE CDC

VESSEL'S NAME	FLAG	RANK	VESSEL TYPE	GRT	S/ON DATE	S/OFF DATE	EMPLOYER
MT. ALMIRQAB	PANAMA	AB	MOTOR TANKER	6516	13.05.2018	03.12.2018	EMIRATES SHIPPING
MV DMS CHALLENGER II	MARSHALL ISLANDS	AB	AHTS	1387	20.02.2019	23.11.2019	P&O MARINE
MV. TEAM BELEUZI	MARSHALL ISLAND	AB	AHTS	2955	17.08.2020	19.03.2020	P & O MARINE
CSC NELSON AVATU		AB	AHTS	6800	29.12.2020	05.10.2021	COMARCO
JASCON 40	NIGERIA	AB	AHTS	1373	09.01.2022	20.07.2022	NIGERIA SHIPPING COMPANY
AHTS KING JESUS	NIGERIA	AB	AHTS	1461	14.10.2022	02.14.2023	NIGERIA SHIPING COMPANY
MWAMBANI	TANZANIA	AB	TUG BOAT	365	08.05.2023	08.11.2023	TPA
ASD TUG KIBOKO	TANZANIA	AB	TUG BOAT	292	30.01.2024	25.05.2024	TPA
MT ALPHA – 117	ZANZIBAR	AB	MOTOR TANKER	15817	22.07.2024	06.12.2024	AZAM MARINE COMPANY





PSSR

No. 011796



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



This is to certify that.....**MR. SABRI FARAHANI SHAURI**.....

Date of birth.....**03.12.1993**.....Place of birth.....**KI LOMBERO**.....

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.

Issued on.....**16.09.2022**.....Valid Until.....**15.09.2027**.....

.....  
*Signature of the Holder*



**LAMECK SONDO**

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



FPFF

No. 010905



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



MR. SABRI FARAHANI SHAURI

This is to certify that.....

Date of birth.....03.12.1993.....Place of birth.....KILOMBERO.....

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.....07.10.2022.....Valid Until.....06.10.2027.....

*Signature of the Holder*



LAMECK SONDO

*Name and Signature of duly Authorised Officer*





SAT

No. 09410



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



MR. SABRI FARAHANI SHAURI

This is to certify that.....

Date of birth.....03.12.1993.....Place of birth.....KILOMBERO.....

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].

07.10.2022

Issued on.....

.....  
*Signature of the Holder*



LAMECK SONDO

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





EFA

No. 03796



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



This is to certify that **MR. SABRI FARAHANI SHAURI**

**KILOMBERO**  
Date of birth **03.12.1993** 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.

Issued on **16.09.2022** Valid Until **15.09.2027**

*Signature of the Holder*



**LAMECK SONDO**

*Name and Signature of duly Authorised Officer*





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



**RFPNW**

**No. 07178**

This is to certify that **MR. SABRI FARAHANI SHAURI**

Date of birth **03.12.1993** Place of birth **KILOMBERO**

Has successfully completed an approved **RATING FORMING PART OF A NAVIGATION WATCH** course. This Certificate has been issued under of Regulation II/4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010]. Section A-VI/I and Table A-VI/II-4 of the STCW Code.

Issued on **07.01.2024**

*Signature of the Holder*



**LAMECK SONDO**

*Name and Signature of duly Authorised Officer*



PST

No. 011660



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



MR. SABRI FARAHANI SHAURI

This is to certify that.....

03.12.1993 KILOMBERO  
Date of birth.....Place of birth.....

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.

30.09.2022 29.09.2027  
Issued on.....Valid Until.....

Signature of the Holder



LAMECK SONDO

Name and Signature of duly Authorised Officer





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



PSCRB

No. 04998

This is to certify that **MR. SABRI FARAHANI SHAURI**

Date of birth **03.12.1993** Place of birth **KILOMBERO**

Has successfully completed an approved **PROFICIENCY IN SURVIVAL CRAFT AND RESCUE BOATS** course. This Certificate has been issued under Regulation VI/2-1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010]. Section A-VI/I and Table A-VI/2-1 of the STCW Code.

Issued on **07.01.2024** Valid to **06.01.2029**

*Signature of the Holder*



**LAMECK SONDO \$B**

*Name and Signature of duly Authorised Officer*



**BTOCTCO**

No. 06541



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



This is to certify that **MR. SABRI FARAHANI SHAURI**

Date of birth **03.12.1993** Place of birth **KILOMBERO**

Has successfully completed an approved **BASIC TRAINING FOR OIL AND CHEMICAL TANKER CARGO OPERATIONS** course.  
This Certificate has been issued under of Regulation VI/1-1.2 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW), 1978 as amended {2010}.

Issued on **07.01.2024**

Signature of the Holder



**LAMECK SONDO**

Name and Signature of duly Authorised Officer

MPP - DSM





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

ASD  
No. 06454



This is to certify that ..... MR. SABRI FARAHANI SHAURI .....

Date of birth ..... 03.12.1993 ..... Place of birth ..... KILOMBERO .....

Has successfully completed an approved ABLE SEAFARER DECK course. This Certificate has been issued under Regulation II/5 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW) 1978 as amended [2010] . Section A-VI/I and Table A-VI/II-5 of the STCW Code.

Issued on ..... 10.02.2024 .....

.....  
*Signature of the Holder*



.....  
LANECK SONO

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





SDSD

No. 08551



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



This is to certify that MR. SABRI FARAHANI SHAURI

Date of birth 03.12.1993 Place of birth KILOMBERO

Has successfully completed an approved **SEAFARER DESIGNATED SECURITY DUTIES** course. This certificate has been issued under Regulation VI/6-2 of the International Convention on the standards of Training Certification and Watch keeping for Seafarers STCW, 1978 as amended [2010].

Issued on 20.04.2024

*Signature of the Holder*



LAMECK SONDO

*Name and Signature of duly Authorized Officer*



# DAR ES SALAAM MARITIME INSTITUTE (DMI)

Dar es Salaam Maritime Institute (DMI)  
P.O.Box 6227  
Dar es Salaam  
Tanzania



Tell 255 22 213 3645  
Fax 255 22 2112600  
Email dmi83@hotmail.com  
website www.dmi.act.

Registered Government Training Institute

Accredited by the Surface and Marine Transport Regulatory Authority

Student Number **DMI/H2S/067/104/066**

This is to Certify that

**SABRI FARAHANI SHAURI**



Holder of **C.D.C No. ZMA-SDB-230375** and Passport No. **TAE 397194** Has successfully completed a training course for

## HYDROGEN SULPHIDE SAFETY (H2S)

This courses the following topics.

- Introduction, Hazards & Characteristics.
- Method of Detecting (Old & New) precautions (location safety) & protection.
- (a) Modern of Detective (Old & New) precautions (location safety) & protection.
- Contingency Plans.
- Response, Procedure, Procedure form, (Employers & Workers).

From **17/05/2024** to **22/05/2024**

Signature of the course  
Coordinator

Signature of the Candidate

**26 MAY 2024**  
Date of Issue

**25 MAY 2026**  
Expiry Date



# DAR ES SALAAM MARITIME INSTITUTE ( DMI )

Dar es Salaam Maritime Institute (DMI)  
P.O.Box 6227  
Dar es Salaam  
Tanzania



Tell 255 22 213 3645  
Fax 255 22 2112600  
Email dmi83@hotmail.com  
website www.dmi.act.

Registered Government Training Institute

Accredited by the Surface and Marine Transport Regulatory Authority

Student Number DMI/BST/105/096/087

This is to Certify that

**SABRI FARAHANI SHAURI**



Identity document number ..... **ZMA-SDB-230375** .....

Has successfully completed course in

## **BASIC SAFETY TRAINING CERTIFICATE**

in accordance with regulation as per Section A-VI/1 of the international Convention on Standards of Training Certificate and Watch Keeping for Seafarers 78/2010 manila Amended.

**PERSONAL SURVIVAL TECHNIQUES (Table-AVI-1) FIRE PREVENTION AND FIRE FIGHTING (Table-AVI/1-2)  
ELEMENTARY FIRST AID (Table-AVI/1-3) PERSONAL SAFETY AND SOCIAL RESPONSIBILITIES (Table-AVI/1-4)**

From ..... **06/05/2024** ..... to ..... **11/05/2024** .....

Signature of the course  
Coordinator

**15 MAY 2024**

Date of Issue

Signature of the Candidate

**14 MAY 2029**

Expiry Date



BOOK:

ISSUED TO: <b>SHAURI</b>			
SURNAME: <b>FARAHANI</b>			
OTHER NAMES <b>SABRI</b>			
DATE OF BIRTH <b>03.12.1993</b>		PLACE OF BIRTH <b>KILOMBERO</b>	
COLOUR OF EYES <b>BLACK</b>	HEIGHT <b>171 CM</b>	WEIGHT <b>67 KG</b>	SEX <b>M</b>
COLOUR OF HAIR <b>BLACK</b>	DATE OF EXPIRY <b>09.04.2023</b>		
DISTINGUISHING MARKS <b>NIL</b>			
DATE OF ISSUE <b>10.04.2018</b>		PLACE OF ISSUE <b>SUMATRA HQ D'SALAAM</b>	

DB  
06043

PAGE 2

PHOTOGRAPH OF SEAFARER

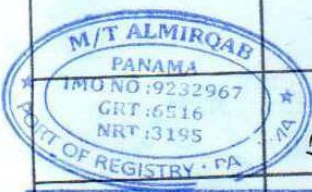





PAGE 3

  
SIGNATURE OF SEAFARER



DB 06043

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			
	13-05-2018	03-12-2018	AB	FOREING GOING	
<b>MV DMS CHALLENGER II</b> PORT OF REG : MAJURO FLAG : MARSHALL ISLANDS IMO NO : 9338931 CALL SIGN : V7LX4 GRT : 1387 NRT : 416 BHP : 400	20/02/2019	23/11/2019	AB	F.G	
<b>MV. TEAM BELEUZI</b> CALL SIGN : V7 A2178 GRT : 2955 NRT : 1837 BHP : 5916 REGISTRY: MARSHAL ISLAND	17-03-2020	19-03-2020	AB	FOREING GOING	

\*ENGINE ROOM WORKERS GIVE HORSEPOWER, OTHERS GROSS TONNAGE



DB 06043

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			
<b>CSC NELSON</b> AVATU OFF NO: 2086 CALL SIGN: Bz25289 IMO NO: 752561 GRT/NRT: 6800/2000	29/09/2020	05/10/2021	AB	FG	<b>CSC NELSON</b> AVATU OFF NO: 2086 CALL SIGN: Bz25289 IMO NO: 752561 GRT/NRT: 6800/2000
<b>JASCON 40</b> IMO 94299502 MMS 657 05860 CALL SIGN - 5NXX3 FLAG - NIGERIA GRT - 1373 Tons NRT - 1252 Tons	09-01-2022	20-07-2022	AB	FOREING GOING	<b>JASCON 40</b> IMO 94299502 MMS 657 05860 CALL SIGN - 5NXX3 FLAG - NIGERIA GRT - 1373 Tons NRT - 1252 Tons
<b>AHTS KING JESUS</b> IMO 9656591 MMSI 657168100 CALL SIGN 50DH3 GRT 1461T. NRT 1314T NIGERIA	14/10/2022	02/04/2023	XB	FOREING GOING	<b>AHTS KING JESUS</b> MASTER

\*ENGINE ROOM VESSELS GIVE HORSEPOWER, OTHERS GROSS TONNAGE







# RECORD OF SEA SERVICE

Name of ship, IMO No., GT and kW	Date & Place		Capacity
	Joining	Leaving	
1. <b>MWAMBANI</b> OFF.NO. 2422 IMO 9802920 365 GT 109 NT PORT VILA	08/05/2023	08/11/2023	A-B
2. <b>ASD TUG KIBOKO</b> 372.9 KW 292 GT IMO NO. 95505 DAR ES SALAAM	30/01/2024 D'SALAAM	26/05/2024 D'SALAAM	A-B
3. <b>M. T. ALPHA-117</b> OFF. No. 6860 GRT : 15817 NRT : 13117 BHP : 6700	ZANZIBAR 22/07/2024	ZANZIBAR 06/12/2024	A-B

6

# RECORD OF SEA SERVICE

Voyage Description	Master or authorised person signature	Ship or Company Stamp
1. COASTAL		
2. COASTAL		
3. COASTAL		

7



VISA / VISAS



URT

P

TZA

Namba ya Pasipoti/Passport No/No. Passeport

TAE397194

Jina la ukoo/Surname/Nom

SHAURI

lina/Given Names/Prénoms

SABRI FARAHANI

Utaifa/Nationality/Nationalité

TANZANIAN

Tarehe ya kuzaliwa/Date of birth/Date de Naissance

03 DEC 1993

Jinsia/Sex/Sexe      Mahali pa kuzaliwa/Place of birth/Lieu de Naissance

M

KILOMBERO

Tarehe ya kutolewa/Date of issue/Date de Délivrance

Mamlaka iliyotoa/Issuing Authority/Autorité de Délivrance

20 AUG 21

PCO, ZANZIBAR

Tarehe ya Mwisho wa Matumizi/Date of expiry/  
Date d'expiration

Sahihi ya mwenye pasipoti/Signature/Signature

19 AUG 31

*[Signature]*

P<TZASHAURI<<SABRI<FARAHANI<<<<<<<<<<<<<<<<<  
TAE3971940TZA9312030M3108192<<<<<<<<<<<<<08





**REVOLUTIONARY GOVERNMENT OF ZANZIBAR**  
**MINISTRY OF HEALTH, SOCIAL WELFARE,**  
**ELDERLY, GENDER AND CHILDREN**

# COVID-19 VACCINATION

Vaccination Number

**Z52994457**

Card Holder Name

**SABRI FARAHANI SHAURI**

Issued Date

**Apr 13, 2022**



Scan NFC with the  
phone view results

Scan QR with  
phone view results





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



Medical Fitness Certificate

Name SHAURI SABRI FARAHANI  
Last Name First Names Middle Name  
Gender: Male ☒ Female ☐ Date of birth (day/month/year) 03.12.1993  
Nationality TANZANIAN  
Home address MAGD MENI KINONDONI  
Proof of identity: Kind of identity PASSPORT Number TAC 397194

I have evaluated the above named applicant according to the Merchant Shipping (Medical Examinations) Regulation, 2016, made under the Merchant Shipping Act, 2003. On the basis of the applicant's personal declaration, my clinical examination and diagnosis test result 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 \_\_\_\_\_

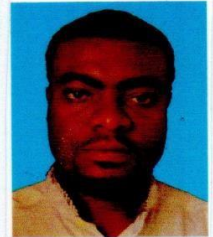
The applicant used aids to hearing to meet a satisfactory standard \_\_\_\_\_ Yes ☒ No

Date of examination 10.12.2024 Place of examination DARESSALAM  
(Day/month/year)

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

Signature of Approved Medical Practitioner Dr. Charles K. Otito

Expiry date of Certificate 09.12.2026  
(day/month/year)



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

Applicant's signature \_\_\_\_\_

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.



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

MAVUNO HOUSE, AZIKIWE ROAD  
P.O. BOX 65202, TEL. 0713-321-426  
DAR ES SALAAM

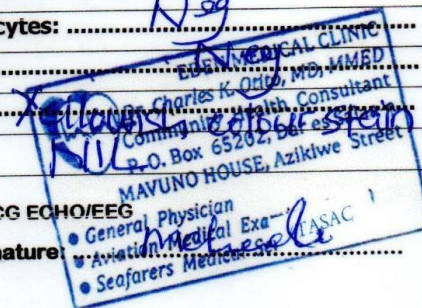
### Seafarers Laboratory Investigation Form

Name: SABRI FARAHANI SHAURI Age: 31 Sex: M  
Card No: OPD 0031 Requested by: DR. OTITO  
Diagnosis: NONE Specimen: BLU  
Clinical Finding:-

INVESTIGATION REQUESTED	
Random blood glucose: <u>4.5 mmol</u>	Urinalysis/Urine
Fasting blood glucose:	Urobilinogen: <u>Normal</u>
HB Level: <u>16.2 g/dl</u>	Glucose: <u>Neg</u>
ABO Blood Grouping: <u>O2</u>	Bilirubin: <u>Neg</u>
HIV Test: <u>NEGATIVE</u>	Ketones: <u>Neg</u>
UPT:	S.Gravity: <u>1.030</u>
WEIGHT: <u>75 KG</u>	Blood: <u>Neg</u>
HEIGHT: <u>171 cm</u>	Protein: <u>Neg</u>
Visual Acuity (VISION)	PH: <u>6.0</u>
Speech/HEARING & Balance:	Nitrate: <u>Neg</u>
Blood Pressure: <u>110/83 mmHg</u>	Leukocytes:
Pulse Rate: <u>67/min</u>	MACR:
Chest X-Ray-PA:	MICR:
ECG: ElectroCardiogram	

Date: 10/12/2024 TO LABORATORY/EXRAY/ECG ECHO/EEG  
DR. Name & Signature: [Signature]

NB: REPORT OVERLEAF





4  
INTERNATIONAL CERTIFICATE\* OF VACCINATION  
OR PROPHYLAXIS

This is to certify that [name] SABRI  
date of birth 30 Dec 93 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>Y.F</u>	<u>27 Oct 2023</u>	
2.		
3.		

\* Requirements for validity of certificate on page 2.

5  
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 prophylac- tique et numéro du lot	Certificate valid from: until: Certificat valable à partir du : jusqu'au : <u>27 Oct 2023</u> <u>for life</u>	Official stamp of the administering centre Cachet officiel du centre habilité
<u>V36412</u> <u>Stamari</u>		

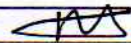
\* Voir les conditions de validité à la page 3.



## CREW APPRAISAL FORM

Vessel:	AHTS KING JESUS	Date:	02-04-2023		
			DD/MM/YY		
Name	SHAURI	SABRI FARAHANI			
	Family name	First name			
Rank:	AB				
Embarked:	14-10-2022	Disembarked:	02-04-2023		
	DD/MM/YY		DD/MM/YY		
<b>Reason for Disembarking</b>					
<input checked="" type="checkbox"/> End of Contract <input type="checkbox"/> Compassionate Leave <input type="checkbox"/> Resigned <input type="checkbox"/> Sick/ Injured <input type="checkbox"/> Dismissed					
<b>A. Performance</b>					
Item	Excellent	Above Average	Satisfactory	Below Average	Unsatisfactory
Professional knowledge and execution of key tasks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety consciousness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative and showing willingness to improve	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English Language	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Socializing, liaison and cooperation with shore/crew	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>B. Recommendations</b>					
1. If his marks are below average, do you think he will be able to improve?					
<input type="checkbox"/> Definitely <input type="checkbox"/> Needs More <input type="checkbox"/> Doubtful <input type="checkbox"/> Shows No Interest					
Area of improvement:					
2. Recommendations for Continued Service/ Re-hire					
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
3. Recommendation for Promotion – Refer to Item 4 Below					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
4. Any specific good qualities or performance you would like to emphasize?					
During his period on board showing good performance.					
5. Specific Training Recommended by Evaluator					
6. Specific Training Requested by Seafarer					

Fleet & Technical Manager:	Signature:	Date:
Port Captain:	Signature:	Date:
Port Engineer:	Signature:	Date:
Designated Person Ashore:	Signature:	Date:
<b>ACTION IF NEEDED</b>		

C/O: DENYS LEB		
Name of Evaluator	Signature of Evaluator	Signature-Evaluated Individual
Name & Signature of Crewing manager		

