APPLICATION FORM



4. FamilyDetails

FamilyName
FirstName
DateofBirth
Cityofliving
PhoneNumbers

Next of Kin (the first emergency contact):

Address of Residence: AZERBAIJAN,BAKU

Doughter

Civil Status(Single, Married, Separated, Divorced, Widowed): Single

					4	V	9	W	S	Y	G
Personal ID Number											

Position Applied for: SEAMAN

1. PersonalData								
Family Name. GAHRAMANOV	First Name: ELNUR		Middle Name: OSMAN					
Date of Birth: 28.05.1987	Place of Birth: A BAKU	Place of Birth: AZERBAIJAN, BAKU				Citizenship: AZEBAIJANIAN		
Permanent Address: AZER ASTARA	BAIJAN,BAKU 1	region.		Phone (Home): NO Phone (Business/ Mobile): +994 55 528 63 28 E-mail:elvingakhramanov88@gmail.com				
2. MaritimeEducation								
Nameofschool	Country	Town]]	From	То	Type of degree or diploma		
AZERBAIJAN CASPIAN	AZERBAIJAN	BAKU	18.0	7.2024	23.01.2025	6 Month		
3. ProfessionalTest								
EnglishTestDate	Na	NameofTest			Score			
ProfessionalTestDate	Nar	NameofTest			Score			
ProfessionalInterviewDate	Res	Result						

Date Available from: ANY TIME

Relationship /

Phone:

5. IdentityDocuments									
Document	Country	Number	PlaceofIssue	IssueDate	ExpiryDate				
Seaman'sBook	AZERBAIJAN	AZE036365	State Maritime Administration	18.04.2025	18.04.2030				
TravelPassport	AZERBAIJAN	C01240846	AZERBAIJAN. BAKU	20.08.2016	19.08.2026				

6. ValidVisa								
CountryorUnion	Type	ValidUntil						

7. Courses Attended and Certificates Obtained								
Document	Number	Dates		Place				
Document	1 (diliber	Issue	Expiry	T Inec				
CertificateofCompetency	RP16900	10.04.2025		State Maritime Administration				
MalteseEndorsementof COC								
OilTankerEndorsement								
ChemicalTankerEndorsement								
GasTankerEndorsement								
Advanced training for oil tanker cargo operations								
Chemical Tanker Familiarization Training								
GasTankerFamiliarizationTraining								
OilTankersSpecializedTraining								
ChemicalTankerSpecializedTraining ConTankerSpecializedTraining								
GasTankerSpecializedTraining BasicTrainings	SO-4605-24	11 12 2024	04.12.2029	State Maritime Administration				
Proficiency in Survival Craft and Rescue Boats	SL-4057-24	11.12.2024 28.11.2024	27.11.2029	State Maritime Administration State Maritime Administration				
AdvancedFireFighting	SL-4057-24	26.11.2024	27.11.2029	State Waritime Administration				
MedicalFirstAidTraining								
Medical First Aid Training and Medical Care								
RO-ro								
Crisis management and human behavior training								
RadarObservation&Plotting								
Automatic Radar Plotting Aids Simulator (ARPA								
)								
BridgeTeamManagement								
Shiphandling&Maneuvering								
Ship Security-related familiarization security-aw	SI-4478-24	27.11.2024		State Maritime Administration				
areness training	51-4470-24	27.11.2024		State Wai time Administration				
MalteseEndorsementof SSO								
ISM Code	SP-4021-24	13.12.2024	09.12.2029	State Maritime Administration				
SafetyOfficer								
ECDISTrainingCourse								
RiskAssessmentCourse								
C.O.W./I.G.S								
FirePracticeonTankers	3.5EG 11/2022	22 10 2021		TOT GEDY/TOEG				
WELDER	MES-JV/30732	23.10.2024		IST SERVICES				
UnmannedMachinerySpace EDAMO Formiliaring formula								
FRAMO FamiliarizationCourse Cargo Ballast Operations on Oil/Chemical Tankers								
Engine resoursce management								
Leadership and Teamwork								
High woltage								
Risk Management And Incident Investigation								
Training of seafarers with designated security duties	SH-3798-24	11.12.2024		State Maritime Administration				
Dangerous hazardous and harmfull cargoes	DII 0170-24							
BasicTraining and qualifications on oil and chemi	G . 4466 54	AT 40 202 :						
cal tanker cargo operations	SA-1408-24	27.12.2024		State Maritime Administration				

8. PhysicalData							
Height	184						
Weight	89						
ColourofHair	Black						
ColourofEyes	Chestnut						
BoilersuitSize	3XL						
ShoesSize	43						
0 Madical History				Yes	No		
9. MedicalHistory	. 4			res			
Have you ever signed off a ship due		ns !			+		
Did you undergo any medical opera		as for an illns	vas/socident?		+		
Have you consulted a doctor during Do you have any health or disability		+					
Do you have any health of disability	y problems now?				+		
If yes, please give full details:							
	Passed:			Validtill:			
InternationalMedicalExamination	22.06.2024	4		22.06.2026	22.06.2026		
VaccinationAgainstYellowFiver							
VaccinationAgainstDiphtheria							
10. References (please give name and address	ss of your current or past e	employer)	Office	remarks			
NameofCompany							
Name of person to contact							
Address							
Phone							
NameofCompany							
Name of person to contact							
Address							
Phone							

11. Bankaddressforallotments							
Beneficiary							
AccountNo.							
NameofBank							
BankAddress							

12. Knowledgeandexperience	Yes	No
OCIMF vettingexperience:		
ISGOT knowledge:		

13. I hereby declare that the above, including Medical History, is true						
Place						

14. ForOfficeuseonly

<u> </u>		

15. SeagoingExperience

Nameofves sel	Flag	Vessel 's Ty pe	DW T	EngTy pe	НР	Manageror Owner	Rank	From d/ m/y	To d/m/	Tota l m/d
MORNOVA	AZE	Dry cargo	2500	Wartsila 6L20		Azerbaijan company	cadet	18.10.2024	23.01.2024	3 mnt

Total rank sea service:

Total type of vessel sea service:

	Total falls sea sei vice.	Total type of vessel sea service.				
Rank	Years	Typeofvessel	Years			
		OIL TANKER				
		LPG				
		DRY CARGO				
		TANKER ICE				
		OIL /CHEMICAL TANKE				
		R				
		FERRY				
Total		Total:				