

# APPLICATION FORM



					7	2	0	X	6	W	E
Personal ID Number											

Position Applied for: <b>COOK</b>	Date Available from: <b>ANY TIME</b>
-----------------------------------	--------------------------------------

<b>1. Personal Data</b>		
Family Name: <b>GAHRAMANOV</b>	First Name: <b>NAZIR</b>	Middle Name: <b>ZAUR</b>
Date of Birth: 01.01.2003	Place of Birth: AZERBAIJAN, ASTARA	Citizenship: <b>AZEBAIJANIAN</b>
Permanent Address: AZERBAIJAN, ASTARA.		Phone (Home): NO Phone (Business/ Mobile): +994507964123 E-mail: nazir.2003.1.1@icloud.com

<b>2. Maritime Education</b>					
Name of school	Country	Town	From	To	Type of degree or diploma
IST SERVICE	AZERBAIJAN		12.01.2023	15.05.2024	IST SERVICE

<b>3. Professional Test</b>		
English Test Date	Name of Test	Score
Professional Test Date	Name of Test	Score
Professional Interview Date	Result	

<b>4. Family Details</b>	
Civil Status (Single, Married, Separated, Divorced, Widowed) : <b>SINGL</b>	
Next of Kin (the first emergency contact) : <b>Hasanzade orkhan (Friend)</b>	Relationship /
Address of Residence:	Phone :

	Doughter	Son	GOOD	BAD	
Family Name		NO			
First Name					
Date of Birth					
Spoken language			<b>TURKEY</b>		
Phone Numbers					

<b>5. Identity Documents</b>					
Document	Country	Number	Place of Issue	Issue Date	Expiry Date

Seaman'sBook	AZERBAIJAN	AZE035772	State Maritime Administration	01.02.2025	01.02.2030
TravelPassport	AZERBAIJAN	C03158293	AZERBAIJAN ASTARA	23.05.2023	22.05.2033

## 6. Valid Visa

Country or Union	Type	Valid Until

## 7. Courses Attended and Certificates Obtained

Document	Number	Dates		Place
		Issue	Expiry	
Certificate of Competency	RP16502	22.01.2025		State Maritime Administration
Maltese Endorsement of COC				
Oil Tanker Endorsement				
Chemical Tanker Endorsement				
Gas Tanker Endorsement				
Advanced training for oil tanker cargo operations				
Chemical Tanker Familiarization Training				
Gas Tanker Familiarization Training				
Oil Tankers Specialized Training				
Chemical Tanker Specialized Training				
Gas Tanker Specialized Training				
Basic Trainings	SO-1112-23	06.03.2023	27.02.2028	State Maritime Administration
Proficiency in Survival Craft and Rescue Boats	SL-0972-23	13.03.2023	06.03.2028	State Maritime Administration
Advanced Fire Fighting				
Medical First Aid Training				
Medical First Aid Training and Medical Care				
RO-ro				
Crisis management and human behavior training				
Radar Observation & Plotting				
Automatic Radar Plotting Aids Simulator (ARPA)				
Bridge Team Management				
Ship handling & Maneuvering				
Ship Security-related familiarization security awareness training	SI-0646-23	28.02.2023	28.02.2028	State Maritime Administration
Maltese Endorsement of SSO				
ISM Code	SP-0722-23	02.03.2023	02.03.2028	State Maritime Administration
Safety Officer				
ECDIS Training Course				
Risk Assessment Course				
C.O.W./ I.G.S				
Fire Practice on Tankers				
Vapour Recovery System				
Unmanned Machinery Space				
FRAMO Familiarization Course				
Cargo Ballast Operations on Oil/Chemical Tankers				
Engine resource management				
Leadership and Teamwork				
High voltage				
Risk Management And Incident Investigation				
Training of seafarers with designated security duties	SH-00682-23	15.03.2023	07.03.2028	State Maritime Administration
Dangerous hazardous and harmful cargoes				
Basic Training and qualifications on oil and chemical tanker cargo operations				

8. PhysicalData	
Height	173
Weight	85
ColourofHair	Black
ColourofEyes	Chestnut
BoilersuitSize	41
ShoesSize	M

9. MedicalHistory	Yes	No
Have you ever signed off a ship due to medical reasons?		+
Did you undergo any medical operation in the past?		+
Have you consulted a doctor during the last 12 months for an illness/accident?		+
Do you have any health or disability problems now?		+

If yes, please give full details:
-----------------------------------

	Passed:	Validtill:
InternationalMedicalExamination	21.01.2025	21.01.2027
VaccinationAgainstYellowFiver		
VaccinationAgainstDiphtheria		

10. References (please give name and address of your current or past employer)	Officerremarks
--	----------------

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
----------------------

--

### 15. Seagoing Experience

Name of vessel	Flag	Vessel's Type	DWT	Eng Type	HP	Manager or Owner	Rank	From d/m/y	To d/m/y	Total m/d
MORNOVA	AZE	Dry cargo	2500	Wartsila 6L20		Azerbaijan company	cadet	15.03.2023	15.05.2023	2 mnt

#### Total rank sea service:

Rank	Years
Total	

#### Total type of vessel sea service:

Type of vessel	Years
OIL TANKER	
LPG	
DRY CARGO	
TANKER ICE	
OIL /CHEMICAL TANKER	
FERRY	
Total:	