

APPLICATION FOR EMPLOYMENT

Please type or use block letters. Please complete in the English Language.



1. POSITION APPLIED FOR	Elektrik zabiti		
2. FAMILY NAME (as in Seaman's Book)	TURKMEN		
3. FIRST NAME (as in Seaman's Book)	ERDAL		
4. DATE OF BIRTH (DD.MM.YYYY)	01.01.1979	5. PLACE OF BIRTH	Balikesir
6. COMPLETE ADDRESS (Only in English). Please indicate an ALTERNATIVE TELEPHONE NUMBER or a NUMBER OF YOUR NEIGHBOURS if the direct line is not available.			
Gümüşcesme mahallesi 8003 sokak no 54/1 Balikesir			
① 05375276001		e-mail: erdalturkmen1979@gmail.com	
7. MARITAL STATUS (Please mark which is relevant). Married Single Divorced Widow/Widower		8. CITIZENSHIP : T.C.	
9. NEXT OF KIN (Please advise compulsory the following information).			
a) Relationship	Es	d) Place of Residence (Please state "THE SAME" if coincides with your permanent address stated above)	
b) Family Name:	Karataş		
c) First Name	Tugba		
①		e-mail	

10. OTHER PERSONAL DATA

a) Height :183	b) Weight 83	c) Boots Size 44	d) Overall Size xxl
e) Color of Eyes :kahverengi	f) Color of Hair siyah		

11. MARITIME EDUCATION

Educational institution	Specialty	Place	Period of Studies	
			From	To
Courses School College Academy	Elektronik	Gemi	2004	2025

12. CERTIFICATES OF COMPETENCY

Grade / Class/STCW Code	Number	Date of Issue (DD.MM.YY)	Date of Expire (DD.MM.YY)	Country
Certificate of Competence: Elektronikci	57FA7EDF	28.03.2025	26.03.2030	Turkiye
Endorsement: :Canakkale	2662CB49	28.03.2025	26.03.2030	Turkiye
Basic Safety Course (VI/1)	6F26B6BD	28.03.2025		Turkiye
Advanced Fire Fighting (VI/3)	2463D3CC	28.03.2025	26.03.2030	Turkiye
Medical First Aid (VI/4-1) Medical Care (VI/4-2)	2C882E94	28.03.2025		Turkiye
Survival Craft and Rescue boats (VI/2-1)	6B61C894	28.03.2025	26.03.2030	Turkiye
Proficiency in Fast Rescue Boats (VI/2-2)	4197865C	28.03.2025	26.03.2030	Turkiye
Tankerman Oil Familiarization Advanced	478F125D	28.03.2025		Turkiye
Tankerman Chemical Familiarization Advanced	6C78Ef5B	28.03.2025	26.03.2030	
Tankerman Gas Familiarization Advanced				
ARPA Operational Management				
GMDSS General Operator				
Bridge Engine Resource Management				
Maneuvering & Ship Handling				
Welder Electro Gas TIG				
ECDIS				
Ship Security Officer Designated Security Duties				

Please turn over and complete the reverse side.

13. PASPORTS AND VISAS (Please OBLIGATORY advise the complete details of your passports)

Type	Country	Serial Number	Date of Issue (DD.MM.YY)	Date of Expire (DD.MM.YY)
National Passport	TURKIYE	U32711835	18Feb2025	12Mar2026
Tourist / Travel Passport				
Seaman's Book / Seaman's Passport				
Other Seaman's Book				
Other Seaman's Book				
US Visa C1/D				
Schengen Visa				

14. MEDICAL CERTIFICATE AND VACCINATIONS

	Date of Issue (DD.MM.YY)	Date of Expire (DD.MM.YY)
Medical Certificate	09.01.2025	09.01.2027
Drug & Alco Test Certificate		
Yellow Fever Vaccination		

15. TESTS

	%	date
MARLINS test result		date
CES 4.1 test result		date

16. PREVIOUS SEA SERVICE (Please submit the complete information about your service at sea during last five years)

Owners or Managers	Vessel's name	Type of vessel	Flag	GRT	Kwt	Type of Engine	Rank	Sign-on (DD.MM.YY)	Sign-off (DD.MM.YY)
Medlog denizcilik	8 gemisi	Container	Türk			Man/BW	Elk.zbt	08/04/2017	05/10/2024
Rana/kopuzlar denizcilik	4 gemisi	Kuruyuk	Türk/yabancı			BW	Elk.zbt	08/06/2014	12/12/2016
Bayraktar denizcilik	Burakbayraktar	Container	Türk			BW	Elk.zbt	05/09/2013	05/03/2014
Aswan denizcilik	Paula1	Kuruyuk	Yabancı			Bw	Elk.zbt	07/01/2013	07/05/2013
Kanlar denizcilik	Mustafa kan	Container	Yabancı			Mak	Elk.zbt	04/03/2009	04/07/2012
Ermar denizcilik	MV Evin	Kuruyuk	Yabancı			BW	Elk.zbt	07/03/2008	07/11/2008
Segaline	Alma R	Kuruyuk	Yabancı			BW	Elk.zbt	01/02/2007	01/01/2008
Yağci denizcilik	Mustafa yagci	Container	Türk			Mak	Elk.zbt	12/04/2006	12/12/2006
Unicor denizcilik	My ship	Kuruyuk	Yabancı			Mak	Elk.zbt	04/05/2003	04/11/2005

DECLARATION: I do hereby declare that all the above statements are complete and correct to the best of my knowledge. I do understand that this application form contains information vital for my further employment, however, its presenting gives me no guarantees for such unless proper requirement available. I do also understand that the below assessments and knowledge will affect my ability to be employed via Marlines Crew Mng.

DATE OF APPLICATION: **11/05/2025**

SIGNATURE:

WHILE SUBMITTING YOUR APPLICATION

- Please attach: the originals of all the documents you have indicated above, all of your passports, your medical book, and your vaccination book.
- Have your tests passed.

Your application will not be accepted unless it complies with all the above requirements.
THANK YOU! DO NOT WRITE ON THE SPACE BELOW!

Test in English passed (date):	Score:	Authorized signature:	Professional Competence Test passed (date):	Score:	Authorized signature:
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