

### CURRICULUM VITAE

Last Name	Mselemu
Other Names	Bahati Rashidi
Marital Status	Married
Place of birth	Kwale
Date of birth	07 Oct, 1998
Address	4- 80403 Kwale
Mobile phone/home	+254740 497 424
Email	<a href="mailto:rashidmleo@gmail.com">rashidmleo@gmail.com</a>
Nationality	Kenyan
Religion	Muslim
Gender	Male
Occupation	Welder
Language	English, Kiswahili
Next of kin	Mwanaisha Salimu Kombo
Relation	Wife
Phone	0746 904 677

Travel Document	Number	Authority/ Government	Issued date	Expiry Date
Passport	BK414908	Kenya	11 <sup>th</sup> Oct, 2022	10 <sup>th</sup> Oct, 2032
Seaman Book	0013150	Kenya	28 <sup>th</sup> Aug, 2024	27 <sup>th</sup> Aug, 2029
Seafarer Medical Certificate	FC05Re.01/23	Kenya	2 <sup>nd</sup> Aug, 2024	1 <sup>st</sup> Aug, 2026
Vaccination card	207375	Kenya	6 <sup>th</sup> Aug, 2024	

**STCW 2010 MANDATORY COURSES**

Course Title	Number	Authority/ Government	Issued date	Expiry date
Personal survival techniques	BST10649	KMA - Kenya	20 <sup>th</sup> August 2024	15 August 2029
Fire prevention and fire fighting	BST10649	KMA - Kenya	20 <sup>th</sup> August 2024	15 August 2029
Elementary first aid	BST10649	KMA - Kenya	20 <sup>th</sup> August 2024	N/A
Personal safety and social responsibility	BST10649	KMA - Kenya	20 <sup>th</sup> August 2024	N/A
Security Awareness Training for seafarers	SAT 10656	KMA - Kenya	20 <sup>th</sup> August 2024	

**EDUCATION BACKGROUND**

2015 - 2018	LUNGA LUNGA MIXED DAY SECONDARY SCHOOL
AUGUST 2024	BANDARI MARITIME ACADEMY

**REFEREES**

NAME	Kabeo Baya
OCCUPATION	Seafarer
TEL	+254796 872 979



# The Kenya National Examinations Council



## KENYA CERTIFICATE OF SECONDARY EDUCATION

This is to certify that the candidate named below sat for the Kenya Certificate of Secondary Education examination in the subjects shown and attained the grades indicated.



THE CANDIDATE ATTAINED THE GRADE SHOWN IN THE SUBJECTS NAMED  
NAME: BAHATI RASHIDI MSELEMU  
LUNGA LUNGA MIXED DAY SECONDARY SCHOOL

\*M1\* 0210612/020

**SUBJECT**  
101 ENGLISH  
102 KISWAHILI  
121 MATHEMATICS  
231 BIOLOGY  
233 CHEMISTRY  
311 HISTORY AND GOVERNMENT  
314 ISLAMIC RELIGIOUS EDUCATION

**GRADE**  
D- (MINUS)  
D+ (PLUS)  
D- (MINUS)  
D- (MINUS)  
D- (MINUS)  
D (PLAIN)  
D- (MINUS)



SUBJECTS NAMED SEVEN MEAN GRADE D (PLAIN)  
EXAMINATION OF YEAR 2018  
PRINTED :110819:13111679

Chief Executive Officer  
Kenya National Examinations Council



Chairman  
Kenya National Examinations Council

This is a secure document printed using special paper and inks.  
Please hold it up to the UV light to verify that the  
word BARAZA LA MITIHANI and the "ORIGINAL"  
embedded thread can be seen through the paper.  
Not valid without a hologram.

KCSE/18

125918



(See overleaf for conditions of issue)





TT3/WF/20/0026312



**GOVERNMENT OF KENYA**  
**NATIONAL INDUSTRIAL TRAINING AUTHORITY**  
**NATIONAL TRADE TEST CERTIFICATE**  
**GRADE III**

This is to certify that **BAHATI RASHIDI MSELEMU**  
Whose photograph appears on this certificate has passed a  
**WELDING AND FABRICATION Grade III Trade Test.**  
Tested at MOMBASA INDUSTRIAL TRAINING CENTRE testing centre,  
NOVEMBER 2020  
Registration No. 20120021632



Trade Testing Officer

Director General - NITA







No. 0030059

REPUBLIC OF KENYA

KENYA MARITIME AUTHORITY

*Merchant Shipping (Training and Certification) Regulations 2016*

**Certificate of Proficiency**

**SECURITY AWARENESS TRAINING FOR SEAFARERS**

The Government of the Republic of Kenya certifies that;

Name **BAHATI RASHIDI MUSELEMU**

Passport/ Id. No **35356332**

Country of Birth **KENYA**

Date of Birth **07 OCTOBER 1998**

Signature of holder



Has been found duly qualified in accordance with the provisions of

**Regulation VI/6 para. 1**

of the International Convention on Standards of Training, Certification and Watch keeping for Seafarers, 1978, as amended and has also met the criteria applicable to the issue of this certificate.

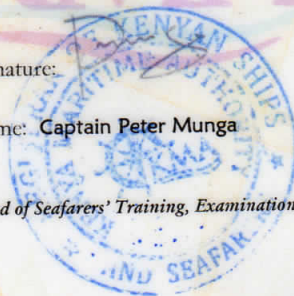
Date of issue: **23 AUGUST 2024**

Signature:

Name: **Captain Peter Munga**

Certificate No: **SAT 10656**

*Head of Seafarers' Training, Examination and Certification*



*This certificate must be kept available in its original form on board the ship on which the holder is serving in accordance with Regulation 1/2 paragraph 11 of STCW, 1978 as amended.*

*Any person other than the holder who may come into possession of this document is kindly requested to send it to Kenya Maritime Authority. P.O Box 95076-80104 Mombasa, Kenya. The authenticity of this document may be verified at the website address: [www.kma.go.ke](http://www.kma.go.ke) or by making an inquiry to the above address*



REPUBLIC OF KENYA

KENYA MARITIME AUTHORITY  
*Merchant Shipping (Training and Certification) Regulations 2016*

No. 0030058

**Certificate of Proficiency**  
**BASIC SAFETY TRAINING FOR SEAFARERS**

The Government of the Republic of Kenya certifies that,

Name	BAHATI RASHIDI MSELEMU
Passport/ Id. No	35356332
Country of Birth	KENYA
Date of Birth	07 OCTOBER 1998
Signature of holder	



has been found duly qualified in

Training	STCW Code	Date of Expiry
Personal Survival Techniques	Table A-VI/1-1	15 August 2029
Fire Prevention and Fire Fighting	Table A-VI/1-2	15 August 2029
Elementary First Aid	Table A-VI/1-3	N/A
Personal Safety and Social Responsibility	Table A-VI/1-4	N/A

conducted in accordance with the provisions of **Regulation VI/1** of the International Convention on Standards of Training, Certification and Watch keeping for Seafarers, 1978, as amended and has also met the criteria applicable to the issue of this certificate.

Date of issue: 20 AUGUST 2024

Signature:

Name: Captain Peter Munga

Certificate No: BST 10649

Head of Seafarers' Training, Examination and Certification



*This certificate must be kept available in its original form on board the ship on which the holder is serving in accordance with Regulation I/2 paragraph 11 of STCW, 1978 as amended.*

*Any person other than the holder who may come into possession of this document is kindly requested to send it to Kenya Maritime Authority, P.O Box 95076-80104 Mombasa, Kenya. The authenticity of this document may be verified at the website address: [www.kma.go.ke](http://www.kma.go.ke) or by making an inquiry to the above address.*



REPUBLIC OF KENYA

# SEAFARER MEDICAL CERTIFICATE

Issued under Regulation 6 of the Merchant Shipping (Seafarer Medical Examination and Certification) Regulations, 2016

Certificate No: M-01789

Last name: MSE LEMU		First name: BAHATI		Middle name(s): RASHIDI	
Nationality: KENTAN		Passport No: 35356332		Date of Birth: 07-10-1998	
Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Rank/Job:		Discharge book No:	
		Department:			

This is to certify that above named seafarer has been examined in accordance with the Seafarers' medical fitness standards and certification requirements established in accordance with the provisions of regulation I/9 of the STCW Convention, 1978 as amended, and regulation 1.2, Maritime Labour Convention, 2006 as amended and found to be fit for sea service, subject to any limitations indicated

		Yes	No
1. Confirmation that identification documents were checked at the point of examination		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Hearing meets the standards in STCW Code Section A-I/9? Date of test (dd/mm/yyyy): 02-08-2024		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Unaided hearing satisfactory?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Visual acuity meets standards in section A-I/9? Visual aids (if worn):	Spectacles: <input type="checkbox"/> Contact lenses: <input type="checkbox"/> None: <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Colour vision meets standards in section A-I/9? Date of last color vision test: 02-08-2024		<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Fit for look-out duties? (Deck and Engine Dept. only)		<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Limitations or restrictions on fitness?		<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "Yes", specify limitations or restrictions:

Examination form No:

8. 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 on board?

Date of Issue 02-08-2024

Date of Expiry\* 01-08-2020

**RECOGNIZED MEDICAL PRACTITIONER**

Sign: DR. KARUME M.O. mmed (UON)

Medical Practitioner  
Name (print): P-O Box 97921 - 80112, MOMBASA

Place of examination: Moh. 0722 602 739 / 0733 516 371

Email: [karume.michael@yahoo.com](mailto:karume.michael@yahoo.com)

Seal/Stamp: \_\_\_\_\_

**REGISTRAR OF KENYAN SEAFARERS**

Sign: \_\_\_\_\_ REGISTRAR OF KENYAN SHIPS & SEAFARERS

Name (print): PETER MUNDART

Place of issue: Mombasa

Seal/Stamp: P. H. box you're - 00104

**Seafarer's declaration:** I hereby confirm that I have been informed about the content of this certificate and my right to appeal in accordance with the Merchant Shipping (Seafarer Medical Examination and Certification) Regulations, 2016.

Signature of the seafarer: \_\_\_\_\_

\*Valid for a maximum period of two years unless the seafarer is under the age of 18, in which case the maximum period of validity shall be one year.


## INTERNATIONAL CERTIFICATE OF VACCINATION OR PROPHYLAXIS

## Requirements for validity

This is to certify that (name) **BAHATI R. MUSELENU**  
 Date of birth **07 OCT 1998** Sex **M**  
 Nationality **KENYAN**  
 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 Regulation.


Vaccine or prophylaxis Vaccin ou agent prophylactique	Date	Signature and professional status of supervising clinician
		Signature et titre du clinicien habilité
1 <b>STAMARIL</b>	<b>06TH</b>	 <b>Port Health Officer</b> <b>Mombasa Kenya</b>
2.	<b>AUG</b>	
3.	<b>2024</b>	

\* Requirements for validity of certificate on page 2

## CERTIFICATE\* INTERNATIONAL DE VACCINATION OU DEPROPHYLAXIS

Nous certifions que (nom) .....  
 ne(e) le ..... De sexe .....  
 et de nationalité .....  
 document d'identification national, le cas échéant .....  
 dont la signature suit .....  
 a été vaccine(e) ou a reçu des agents prophylactiques a la in date  
 indiquée contre: (non de la maladie ou de l'affection)

conformément au Règlement sanitaire international.

Manufacturer and batch no. of vaccine or prophylaxis	Certificate valid from: until:	Official stamp of the administering centre
Fabricant du vaccin ou de l'agent prophylactique et numéro du lot	Certificat valable à partir du: jusqu'au:	Cachet officiel du centre habilité
<b>V3K11</b>	<b>To 02</b>	
<b>Stamaril</b> Batch / Lot no. ....	<b>LIFE</b>	
	<b>TIME</b>	

\* Voir les conditions de validité à la page 3



## PERSONAL DETAILS



Surname:	MSELEMU		
Other name(s):	BAHATI RASHIDI		
Nationality:	KENYAN	Place of Birth (County):	KWALE
Date of Birth:	07 OCTOBER 1998		
Height (Mtrs):	1.71	Gender:	MALE
ID/Passport no:	35356332	CDC No:	13150
Next of Kin:	Name:	MWANAISHA SALIMU KOMBO	
	Relationship:	WIFE	
Address/ Contact details:	0746904677		
Date of Issue:	28 AUGUST 2024		
Date of Expiry:	27 AUGUST 2029		
Signature of holder:			

Issued by Kenya Maritime Authority



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CDC No.  
0013150

5'8" *ft/in* **1.73** *m/cm*

10

Signature of Passport Officer / *Sahihi ya Afisa wa Pasi* /  
Signature de l'Agent des Passeports

Pealungo

Profession / Taaluma / Profession

Signature of Holder / *Sahihi ya Mwenye Pasi* /  
Signature du Titulaire

Type/Aina/Type Country Code/Namburi ya Nchi/Code du Pays Passport No./Namburi ya Pasi/N° de Passeport

BK414908

Given Names: *Majina Aliyopewa*, *Prénoms*

Nationality: *Uzbeke/Nationalité*Personal No./Nambari ya Kibinafsi/N<sup>o</sup> Personnel

Date of Birth/Tarehe ya Kazaliwa/Date de Naissance

07 OCT 1998

3015051

Sex (Jinsia) Sexe

Place of Birth/Mahali pa Kuzaliwa/Lieu de Naissance

M

KWALE, KEN

Date of Issue/Tarehe ya Kutolewa/Date de Délivrance

11 OCT 2022

Date of Expiry/Tarehe ya Mwisho/Date d'Expiration

10 OCT 2032

Issuing Authority/Mamlaka ya kutoa Pasi/Autorité

GOVERNMENT OF KENYA

Holder's Signature/Sahihi ya Mwenye Pasi/  
Signature du Titulaire

BR

BK414908&lt;3KEN9810075M321010135356332&lt;&lt;&lt;&lt;&lt;22