CURRICULLUM VITAE - STEWARD/LAUDRYMAN-MESSMAN

PERSONAL

Name : **RIZAL PAHLEVI**
Place/Date of Birth : **TAMBON TUNONG/23-09-1989**
Address : **Kavling Bukit Melati Block f2 number 32**
Marital Status : **Single**
Nationality : **Indonesian**
Religion : **Moslem**
Mobile : **+6289620202984 / +6282273171071**
Email : **pierandekcan@gmail.com**

DOCUMENT

Name of Document	Number	Issued Date	Expire Date	Issuing Authority
Passport	E7245395	May 2th 2024	May 22th 2034	Batam
Seaman Book	J 013573	June 12th 2024	June 12th 2027	Batam

CERTICIFATE OF COMPETENCY

Type of Certificate May	Certificate Number	Place / Date of Issued
Ship Steward	010624010	Jakarta, June 12th 2024
Food Handling	040624023	Jakarta, June 12th 2024
Food Safety	040624023	Jakarta, June 12th 2024

CERTICIFATE OF PROFICIENCY		
Type of Certificate	**Certificate Number**	**Place / Date of Issued**
Basic Safety Training (BST)	6212426791015424	Batam, May 21, 2024
Vaccine Yellow Fever	28112022	Batam, June 24, 2024
Vaccine Hepatitis A	AHAVC117AD	Batam, June 28, 2024
Vaccine Typoid	25082022	Batam, June 28, 2024
Internasional Covid-19 Vaccination Certificate	442-8818-4075-7394	Unlimted
Bosiet With EBS	OPITOMSUEVJUHOE	Batam, May 29, 2024
Travel Safely By boat	OPITORKPIBLROFR	Batam, May 29, 2024
Bosiet Opito Card	----------	Batam, May 29, 2024
Medical Check Up ILO	09-434/666/X/UM/24	Batam, Sep 23, 2024

WORKING EXPERIENCE

Name of Vessel	Type of Vessel	GRT HP	Rank	Period		Flag
				Sign On	Sign Off	
MV 34 MIAMTE FPSO, CSS 10 CATERING SINGAPORE, ENI MEXICO	FPSO 120 POB	89822	STEWARD	03 July 2024	20 September 2024	BAHAMAS
Floatel International Floatel, Triumph SODEXO International, ORSTED TAIWAN PROJECT	SEMISUB ACCOMO D ATION - COSNTR U CTION 230 POB	80,000	STEWARD	27 September 2024	22 Desember 2024	PANAMA

Your Faithfully

(RIZAL PAHLEVI)

PERHATIAN

1. Paspor ini adalah dokumen milik Negara.
2. Kecuali pejabat yang berwenang, dilarang mencoret atau melakukan perubahan apapun atas tulisan, cetakan dan/atau dalam bentuk apapun yang terdapat dalam paspor ini.
3. Harap memperhatikan ketentuan kebilangan kewarganegaraan Republik Indonesia yang diatur dalam Pasal 23 Undang-Undang Nomor 12 Tahun 2006 tentang Kewarganegaraan Republik Indonesia.
4. Harap meminta keterangan atau visa terlebih dahulu dari Perwakilan Negara Asing yang akan dikunjungi.
5. Dalam hal paspor ini hilang agar segera melapor kepada:
   a. Kantor Kepolisian Negara Republik Indonesia dan Kantor Imigrasi terdekat; atau
   b. Kantor Polisi setempat dan Kepala Perwakilan Republik Indonesia terdekat dalam hal terjadi di luar negeri.

IDN **PASPOR**
PASSPORT

REPUBLIK INDONESIA
REPUBLIC OF INDONESIA

IDN

JENIS / *TYPE*: P

KODE NEGARA / *COUNTRY CODE*: IDN

NO. PASPOR / *PASSPORT NO.*: E7245395

NAMA LENGKAP / *FULL NAME*
RIZAL PAHLEVI

KEWARGANEGARAAN / *NATIONALITY*
INDONESIA

TGL. LAHIR / *DATE OF BIRTH*: 23 SEP 1989

KELAMIN / *SEX*: L/M

TEMPAT LAHIR / *PLACE OF BIRTH*: TAMBON TUNONG

TGL. PENGELUARAN / *DATE OF ISSUE*: 22 MAY 2024

TGL. HABIS BERLAKU / *DATE OF EXPIRY*: 22 MAY 2034

NO. REG.: 1A11BZ7007AAQP

KANTOR YANG MENGELUARKAN / *ISSUING OFFICE*: BATAM

P<IDNPAHLEVI<<RIZAL<<<<<<<<<<<<<<<<<<<<<<<<
E7245395<5IDN8909235M3405226217109230990045O

Indonesia
Poros Maritim Dunia

PERHATIAN

1. Buku ini merupakan Dokumen Identitas Pelaut sesuai dengan Undang-Undang Nomor 17 tahun 2008 tentang Pelayaran pasal 145 dan Konvensi Mengenai Identitas Pelaut, 1958, yang disahkan oleh Konferensi Organisasi Buruh Internasional pada tanggal 13 Mei 1958;

2. Buku ini harus disimpan dan diperlihatkan oleh pemegang bila diminta oleh pejabat yang berwenang;

3. Jika buku ini hilang, pemegang harus segera melaporkan kepada:
   a. Polisi setempat, Syahbandar, dan atau Direktorat Jenderal Perhubungan Laut;
   b. Polisi setempat dan kepada Perwakilan RI terdekat, bila kehilangan terjadi di luar negeri.

4. Pemegang buku tidak diperbolehkan membuat catatan atau perubahan terhadap isi buku pelaut ini. Bila diperlukan perubahan, maka perubahan harus dilakukan oleh Direktorat Jenderal Perhubungan Laut atau Pejabat berwenang;

5. Apabila buku ini rusak atau penuh, maka harus diganti dengan buku baru yang dikeluarkan oleh Direktorat Jenderal Perhubungan Laut atau Pejabat berwenang;

6. Jika diketahui terjadi pemalsuan terhadap buku pelaut ini dan atau data yang tercantum di dalamnya dan pelanggaran lainnya, maka pemegang buku pelaut ini akan dikenakan sanksi sesuai dengan hukum yang berlaku dan Direktorat Jenderal Perhubungan Laut atau Pejabat berwenang akan menarik buku pelaut tersebut.

DKP. IV-12

J 013573

REPUBLIK INDONESIA
REPUBLIC OF INDONESIA

BUKU PELAUT
SEAMAN'S BOOK

J 013573

5

Keterangan Pemegang / *Description of Bearer*	
Tempat & Tanggal lahir *Place & Date of Birth*	: TAMBON TUNONG 23 Sep 1989
Alamat tetap *Permanent Address*	Perum buana raya orleander 63 sagulung batam Prov.kepri
Warna Rambut *Colour of hair*	: HITAM
Warna Mata *Colour of eyes*	: COKLAT
Warna Kulit *Colour of skin*	: SAWO MATANG
Tinggi Badan *Height*	: 170 CM
Golongan Darah *Blood Group*	: B
Jenis Kelamin *Sex*	: M Pria / Wanita *Male / Female*

6

Nomor Buku Pelaut *Number of Seaman's Book*	: J 013573
Kode Pelaut *Seafarer Code*	: 6212426791
No. Pendaftaran *Reg. Number*	: R202406086637

Photo Pemegang / *Photograph of holder*

Tanda tangan pemegang atau Sidik Ibu Jari Kiri
Signature of Holder or Left Thumb Print

J 013573

7

Buku Pelaut ini berlaku untuk seluruh dunia

This Seaman's Book is valid for all parts of the world

KECUALI / *EXCEPT* :

BERLAKU SAMPAI / *VALID UNTIL*

12 Jun 2027

PENDAFTARAN DI / *REGISTERED AT* : **Kantor Kesyahbandaran dan Otoritas Pelabuhan Khusus Batam**

TGL. / *ON* : **12 Jun 2024**

DIKELUARKAN OLEH / *ISSUED BY* : Pejabat Pendaftaran Sijil / *Mustering Officer*

Jabatan / *Position* : **Kepala Bidang Kelaiklautan Kapal**

Tanda Tangan / *Signature*

Nama / *Name* : **FERRY ANGGORO H.S.Si.T.M.M.Tr**

NIP. **Pembina(IV/a)**

19761012 200604 1 001

8

DIPERPANJANG SAMPAI / *RENEWED UNTIL*

DI / *AT* :

TGL / *ON* :

OLEH / *BY* : Pejabat Pendaftaran Sijil/*Mustering Officer*

Jabatan / *Position* :

Tanda Tangan / *Signature* :

Nama / *Name* : .....

NIP.

DIPERPANJANG SAMPAI / *RENEWED UNTIL*

DI / *AT* :

TGL / *ON* :

OLEH / *BY* : Pejabat Pendaftaran Sijil/*Mustering Officer*

Jabatan / *Position* :

Tanda Tangan / *Signature* :

Nama / *Name* : .....

NIP.

3

REPUBLIK INDONESIA
KEMENTERIAN PERHUBUNGAN
DIREKTORAT JENDERAL PERHUBUNGAN LAUT

REPUBLIC OF INDONESIA
MINISTRY OF TRANSPORTATION
DIRECTORATE GENERAL OF SEA TRANSPORTATION

BUKU PELAUT
SEAMAN'S BOOK

Buku pelaut ini isinya 42 halaman bernomor
This Seaman's Book contains 42 numbered pages

4

NAMA LENGKAP PEMEGANG
FULL NAME OF BEARER

RIZAL PAHLEVI

WARGA NEGARA
NATIONALITY

REPUBLIK INDONESIA
REPUBLIC OF INDONESIA

Approved Training Center by Indonesia Ministry of Manpower and Transmigration No. 58/2013
Certificate No. 010624010
Validate this certificate at www.blueocean-tc.com
Expired date : June 12th, 2027

This is to certify that

RIZAL PAHLEVI

was born on September 23rd, 1989

has successfully completed the

STEWARD TRAINING

in accordance with the MLC 2006 Regulation 3.2 Standard A3.2 Guideline B3.2

given by

Blue Ocean Training Center

Jakarta, June 12th, 2024

ABDURROCHIM
Director

DIAH ASTUTI, S.si
Training Manager

TRANSCRIPT OF COMPETENCY

TRANSKRIP KOMPETENSI

ILO Convention No.69 (1946) Concerning the Certification of Ships Cook. President of Republic of Indonesia decree No.4 (1992) Concerning Ratification of ILO Convention No.69. Memorandum of Understanding (MOU) Ministry of Manpower and Transmigration (No.Kep.199/MEN/2002) ; Ministry of Transport and Communication (No. KM.83/2002) ; Ministry of National Education (No.03/X/KB/2002) ; Ministry of Sea and Fisheries (No:10/KB/Dep.KP/2002) Concerning Education and Training Standardization and Certification of Seafarer of Commercial and Fishing Ships non SCTW 1978 amandement 1995.
MLC 2006 Regulation 3.2 Standard A3.2 and Guideline B3.2 - Food and Catering with respect to ship's cooks and other catering personnel.

ILO Convention No.69 tahun 1946 yang telah diratifikasi melalui Keppres nomor 4 tahun 1992 tentang Sertifikasi bagi Juru Masak Kapal.Kesepakatan Bersama Menteri Tenaga Kerja dan Transmigrasi, Menteri Perhubungan, Menteri Pendidikan Nasional, Menteri kelautan dan Perikanan Nomor : KEP.199/MEN/2002, Nomor : KM.83 Tahun 2002, Nomor : 03/X/KB/2002, Nomor :10/KB/Dep.KP/2002 tentang Pendidikan dan Pelatihan Standarisasi dan Sertifikasi Pelaut Kapal Niaga dan Kapal Perikanan yang belum diatur dalam SCTW 1978 amandeman 1995. MLC 2006 Peraturan 3.2 Standar A3.2 dan Pedoman B3.2 Makanan dan Katering mengenai Juru Masak Kapal dan pegawai penyedia makanan lainnya.

- Introduction
- Housekeeping
- Organization Chart
- Non-Discrimination
- Working Hours
- Drinking and Water supply
- Drugs and Alcohol
- Security
- Breakage
- Accidents and Safety
- Working Schedules
- Appearance & Professionalism
- Personal and General Cleanliness
- Job Duties and Expectations
- Server's Script
- Basic Galley Routine Job
- Effective Comunication
- Garbage Management

Approved Training Center by Indonesia Ministry of Manpower and Transmigration No. 58/2013
Certificate No. 040624023
Validate this certificate at www.blueocean-tc.com
Expired date : June 12th, 2027

BOTC

This is to certify that

RIZAL PAHLEVI

was born on September 23rd, 1989

has successfully completed the

FOOD HANDLING

in accordance with the MLC 2006 Regulation 3.2 Standard A3.2 Guideline B3.2

given by

Blue Ocean Training Center

Jakarta, June 12th, 2024

ABDURROCHIM
Director

DIAH ASTUTI, S.si
Training Manager

TRANSCRIPT OF COMPETENCY

TRANSKRIP KOMPETENSI

ILO Convention No.69 (1946) Concerning the Certification of Ships Cook. President of Republic of Indonesia decree No.4 (1992) Concerning Ratification of ILO Convention No.69. Memorandum of Understanding (MOU) Ministry of Manpower and Transmigration (No.Kep.199/MEN/2002) ; Ministry of Transport and Communication (No. KM.83/2002) ; Ministry of National Education (No.03/X/KB/2002) ; Ministry of Sea and Fisheries (No:10/KB/Dep.KP/2002) Concerning Education and Training Standardization and Certification of Seafarer of Commercial and Fishing Ships non SCTW 1978 amandement 1995.
MLC 2006 Regulation 3.2 Standard A3.2 and Guideline B3.2 - Food and Catering -
with respect to ship's cooks and other catering personnel.

ILO Convention No.69 tahun 1946 yang telah diratifikasi melalui Keppres nomor 4 tahun 1992 tentang Sertifikasi bagi Juru Masak Kapal.Kesepakatan Bersama Menteri Tenaga Kerja dan Transmigrasi, Menteri Perhubungan, Menteri Pendidikan Nasional, Menteri kelautan dan Perikanan Nomor : KEP.199/MEN/2002, Nomor : KM.83 Tahun 2002, Nomor : 03/X/KB/2002, Nomor :10/KB/Dep.KP/2002 tentang Pendidikan dan Pelatihan Standarisasi dan Sertifikasi Pelaut Kapal Niaga dan Kapal Perikanan yang belum diatur dalam SCTW 1978 amandeman 1995. MLC 2006 Peraturan 3.2 Standar A3.2 dan Pedoman B3.2 Makanan dan Katering mengenai Juru Masak Kapal dan pegawai penyedia makanan lainnya.

* Overview
* Foodborne Illness
* Potentially Hazardous Food
* Contamination of Food
* Temperature Control
* Food Receipt
* Food Processing
* Food Display
* Food Packaging
* Cleanliness
* Single Use Item
* Animal and Pest
* Food Transportation
* Food Disposal
* Food Handling Skills and Knowledge
* Health of Person Who Handle Food
* Hygiene of Food Handlers
* General Duties of Food Businesses
* Structure, Design, and Maintenance
* Temperature Measuring Devices
* Cleaning and Sanitising of Specific Equipment
* Management Control Techniques - HACCP, Food Safety Program

No. 040624023

I'M ALERT

Food Safety Standards
All Food Handlers Have Obligations
Australia & New Zealand

In

FOOD SAFETY

This is to certify that:

RIZAL PAHLEVI

was born on September 23rd, 1989

Completed I'M ALERT Food Safety Training on:

12 - 06 - 2024

Food Safety is our business!

EHA ENVIRONMENTAL HEALTH AUSTRALIA

Blue Ocean Training Center

www.blueocean-tc.imalert.com.au

BOTC BLUE OCEAN TRAINING CENTER

ENVIRONMENTAL HEALTH AUSTRALIA

I'M ALERT - Food Safety
Training Acknowledgement Form

Section	Section Viewed	Assessment Completed
Overview	✓	NA
Foodborne Illness	✓	NA
Potentially Hazardous Food	✓	✓
Contamination Of Food	✓	NA
Temperature Control	✓	✓
Food Handling Skills And Knowledge	✓	NA
Food Receipt	✓	✓
Food Storage	✓	✓
Food Processing	✓	✓
Food Display	✓	✓
Food Packaging	✓	✓
Food Transportation	✓	✓
Food Disposal	✓	✓
Food Recall	✓	NA
Health Of Persons Who Handle Food	✓	✓
Hygiene Of Food Handlers	✓	✓
General Duties Of Food Businesses	✓	✓
Cleanliness	✓	✓
Cleaning And Sanistising Of Specific Equipment	✓	✓
Structure, Design And Maintenance	✓	✓
Temperature Measuring Devices	✓	✓
Single Use Items	✓	✓
Animals and Pests	✓	✓
Management Control Techniques - HACCP, Food Safety Program	✓	NA

To Do List: Action Item	Date Completed
Make yourself aware of the location of the designated hand wash basin/s in your work area Make yourself aware of the location where the thermometer is stored	12 - 06 - 2024

Type of Training ☑ **INDUCTION** ☐ **ONGOING**

I, RIZAL PAHLEVI, hereby certify that I have undergone and understood the training components and assessments indicated above. I agree to abide by these practices and recognise that complying with these procedures will assist in ensuring healthy and safe working conditions.

EMPLOYEE/CONTRACTOR NAME	RIZAL PAHLEVI
EMPLOYEE/CONTRACTOR POSITION	STEWARD
EMPLOYEE/CONTRACTOR NAME	DIAH ASTUTI, S.si
EMPLOYEE/CONTRACTOR POSITION	TRAINING MANAGER
ORGANISATION/LOCATION	Blue Ocean Training Center, Jakarta, Indonesia

EMPLOYEE/CONTRACTOR SIGNATURE	SUPERVISOR SIGNATURE
RIZAL PAHLEVI	DIAH ASTUTI, S.si
DATE : 12 - 06 - 2024	DATE : 12 - 06 - 2024

*** Save and file as part of your employee business records.**

Blue Ocean Training Center

www.blueocean-tc.imalert.com.au

KEMENTERIAN PERHUBUNGAN REPUBLIK INDONESIA
DIREKTORAT JENDERAL PERHUBUNGAN LAUT

MINISTRY OF TRANSPORTATION OF THE REPUBLIC OF INDONESIA
DIRECTORATE GENERAL OF SEA TRANSPORTATION

SERTIFIKAT KETERAMPILAN
CERTIFICATE OF PROFICIENCY

Nomor Seri / *Serial No.*
CP6305937

Nomor Sertifikat / *Certificate No.*
6212426791015424

Dengan ini dinyatakan bahwa
This is to certify that

Nama / *Name* : **RIZAL PAHLEVI**
Tempat dan tanggal lahir / *Place and date of birth* : TAMBON TUNONG , 23 September 1989

telah menyelesaikan pelatihan dan lulus evaluasi :
has completed approved training and passed the assessment of

BASIC SAFETY TRAINING

yang dilaksanakan oleh : MARITIME NATIONAL TRAINING CENTER
which has held by

di : Batam
at : 13 May 2024 to 21 May 2024

Sesuai ketentuan STCW 1978 beserta dengan amandemennya, Peraturan Section A -VI/1 STCW 2010
in accordance with the provisions of STCW 1978 as amended, Regulation ***Section A -VI/1 STCW 2010***
yang telah mendapat pengesahan dari Direktorat Jenderal Perhubungan Laut selaku Administrasi.
which has been approved by the Directorate General of Sea Transportation as Administration.

Jakarta, 28 May 2024

An. Direktur Jenderal Perhubungan Laut
O.b. Director General of Sea Transportation
DIREKTUR PERKAPALAN DAN KEPELAUTAN
Director of Marine Safety and Seafarers
KEPALA SUB DIREKTORAT KEPELAUTAN
Head of Seafarer Affairs Subdirectorate

Ditandatangani secara elektronik
Electronically Signed

Capt. MALTUS J. KAPISTRANO, S.SiT., M.Si.

Tandatangan Pemilik
Signature of the Holder

Sertifikat ini berlaku untuk 5 (lima) tahun sejak tanggal diterbitkan
This Certificate is valid for 5 (five) years commenced from the date of issuance

M00-0400976

International Certificate of Vaccination or Prophylaxis

International Health Regulations (2005)

Certificat International de Vaccination ou de Prophylaxie

Règlement Sanitaire International (2005)

Issued to / Délivré à

Rizal Pahlevi

Passport number or travel document number
Numéro de passeport ou numéro de document de voyage

INTERNATIONAL CERTIFICATE* OF VACCINATION OR PROPHYLAXIS

This is to certify that (name) Rizal Pahlevi

date of birth 23 Sep 1989 sex Male

nationality Indonesian

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.

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.

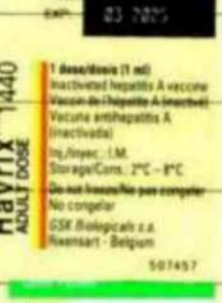
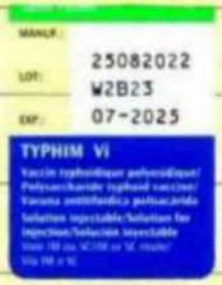
Vaccine or prophylaxis Vaccin ou agent prophylactique	Date Date	Signature and professional status of supervising clinician Signature et titre du clinicien responsable	Manufacturer and batch no. of vaccine or prophylaxis [illegible] de [illegible]	Certificate valid from: until: Certificat valable à partir du : jusqu'au :	Official stamp of the administering centre Cachet officiel du centre habilité
1. Stamaril	21 JUN 2024	Prihtina Suryawati, MD, MSc Port Health Officer		08 JUL 2024	
2.				until Life of Person Vaccinated	
3.					

STAMARIL
Vaccin de la fièvre jaune (Vivant)
Yellow fever vaccine (Live)
Vacuna contra la fiebre amarilla
(Vivo)
Sanofi Pasteur
Manuf.: 28112022
Lot/Lote: W3J43
Exp/Cad: 10-2025
105 977190

* Requirements for validity of certificate on page 4.

e validité à la page 5.

OTHER VACCINATIONS / AUTRES VACCINATIONS

Disease targeted Maladie visée	Date Date	Manufacturer, brand name and batch no. of vaccine Fabricant, nom de marque et n° de lot du vaccin	Next booster (date): Prochain rappel (date):	Official stamp and signature Cachet officiel et signature
HEPATITIS A VACCINE				dr. Ebiet Yudi Santoko Medical doctor
TYPHOID VACCINE				dr. Ebiet Yudi Santoko Medical doctor

REPUBLIC OF INDONESIA
REPUBLIK INDONESIA

KEMENTERIAN KESEHATAN REPUBLIK INDONESIA

INTERNATIONAL COVID-19 VACCINATION CERTIFICATE

SERTIFIKAT VAKSINASI COVID-19 INTERNASIONAL

Number / Nomor : 4429-8818-4075-7349

For further detail, please visit http://verify.kemkes.go.id
Untuk informasi lebih lanjut, kunjungi http://verify.kemkes.go.id

DETAILS / RINCIAN

Full Name Nama Lengkap	RIZAL PAHLEVI
National Identity Number NIK	2171092309899004
Passport Number No. Passport	E7245395
Date of Birth Tanggal Lahir	1989-09-23

VACCINATION DETAILS / RINCIAN VAKSINASI

Date of vaccination Tanggal Vaksinasi	Dose Number Dosis ke	Country of Vaccination Negara /Tempat Vaksinasi	Vaccine Manufacture Jenis Vaksin	Batch ID Batch ID
2021-08-23	1	Indonesia	Vaksin Covid-19 Biofarma	24004821
2021-09-22	2	Indonesia	CoronaVac	202108167i
2022-10-20	3	Indonesia	COVID-19 Vaccine Pfizer	FB9987

Vaccination is to protect ourselves and our families, neighbors and protect Indonesian people and people worldwide.
Vaksinasi melindungi diri kita, keluarga kita, tetangga dan melindungi rakyat Indonesia dan manusia di seluruh dunia.

World Health Organization Digital Documentation for COVID-19 Certificates Format

This is to certify that

Rizal Pahlevi

attended a course at PT. BSTC GLOBAL PTY

and has been assessed against, and met the outcomes of, the following OPITO-approved standard:

Travel Safely by Boat (TSbB) Initial Training

5605

Awarded on 29th May 2024

Expiry Date 28th May 2028
Unique Certificate No OPITORkpIBlrDFR
OPITO Learner No L02097008

Stephen Marcos Jones
Chief Executive Officer

This is to certify that

Rizal Pahlevi

attended a course at PT. BSTC GLOBAL PTY

and has been assessed against, and met the outcomes of, the following OPITO-approved standard:

Basic Offshore Safety Induction and Emergency Training (BOSIET) with Emergency Breathing System (EBS)

5700

Awarded on 29th May 2024

Expiry Date 28th May 2028
Unique Certificate No OPITOm9u8vjUHqe
OPITO Learner No L02097008

Stephen Marcos Jones
Chief Executive Officer

BSTC
We Train People

SAFETY TRAINING PROVIDER TO PETROLEUM & MARITIME INDUSTRY IN THE REGION

NAME

RIZAL PAHLEVI

I.D NUMBER

E7245395

COURSE CODE

5707

CERTIFICATE NUMBER

OPITORkpIBIrDFR / OPITOm9u8vjUHqe

COURSE VALIDITY DATE

28 May 2028

COURSE DATE

27 May 2024 - 29 May 2024

COURSE COMPLETED & PASSED

Basic Offshore Safety Induction and Emergency Training & Travel Safely by Boat Course

Klinik MEDILAB
PUSAT PEMERIKSAAN KESEHATAN TENAGA KERJA
Jl. Jend Ahmad Yani Komplek Ruko Taman Niaga Sukajadi Blok J No. 1-6 Batam 29433 Telp. (0778) 7372022, (0778) 7372023, 08117701188, 08117701199
E-mail : customercare@medilab-clinic.com ; operational@medilab-clinic.com ; Website : www.medilab-clinic.com

HEALTH SCREENING REPORT

Preemployment Physical Examination

CONFIDENTIAL

No. Medical Record : 09434/666/IX/UM/24

134312

PERSONAL DATA

Name : RIZAL PAHLEVI
Birthday/Gender/Emp. ID : 23 September 1989 / Male / E 7245395
Father's Name : MUSLIM LUBIS
Address : KAV BUKIT MELATI BLOK F2 NO 32, BATAM
Occupation : MESS BOY
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : , BATAM

LABORATORY REPORT

BLOOD COUNT

Test Name		Result	Unit	Reference Range
HGB		15.0	gr/dl	M: 13.2 - 17.3 F: 11.7 - 15.5
WBC		6.3	10^3/ mm^3	M: 3.8 - 10.6 F: 3.6 - 11.0
RBC		4.82	10^6/ mm^3	M: 4.4 - 5.9 F: 3.8 - 5.2
ESR		4	mm/hr	M: 0 - 10 F: 0 - 20
HCT		43.2	%	M: 40 - 52 F: 35 - 47
PLT		308	10^3/mm^3	150 - 440
MCV		89.9	µm^3	80 - 100
MCH		31.1	pg	26 - 34
MCHC		34.5	gr/dl	32 - 36
Differential Count				
- LYM		34.0	%	25 - 40
- MON	*	8.1	%	2 - 8
- GRA		57.9	%	43 - 76

URINE FEME

Macroscopy	Result
- pH	6
- Specific Gravity	1.015
- Glucossa	Negative
- Protein	Negative
- Ketones	Negative
- Bilirubin	Negative
- Urobilinogen	Normal
- Nitrit	Negative
- Blood	Negative
- Leucocytes	Negative

X-RAY REPORT

Chest PA:

Show no Abnormalitis.
There is no evidence of pulmonary tuberculosis or other pulmonary,pleural or mediastinal lesions.
The size,shape and position of the heart are within limits of normal variations.
Bony structures of the thorax show no abnormalities.

Date of Exam : 23 September 2024

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PUSAT PEMERIKSAAN KESEHATAN TENAGA KERJA
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HEALTH SCREENING REPORT

Preemployment Physical Examination

134312

CONFIDENTIAL

No. Medical Record : 09434/666/IX/UM/24

PERSONAL DATA

Name : RIZAL PAHLEVI
Birthday/Gender/Emp. ID : 23 September 1989 / Male / E 7245395
Father's Name : MUSLIM LUBIS
Address : KAV BUKIT MELATI BLOK F2 NO 32, BATAM
Occupation : MESS BOY
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : , BATAM

MEDICAL HISTORY

	Yes	No		Yes	No		Yes	No
1. Hypertension		X	4. Allergic Rhinitis		X	7. Surgery		X
2. Bronchial Asthma		X	5. Peptic Ulcer		X	8. Echolalia		X
3. Bloody Cough		X	6. Epilepsy		X	9. Others		X

CLINICAL EXAMINATION

Weight : 76 Kg Height : 189 Cm
BMI : 21.28

	Yes/Abnormal	No/Normal
1. Vision		
a. Distant Vision		X
(Should be at least 6/12 in both eyes with or without glasses)		
b. Near Vision		X
(Should be at least J2 in both eyes with or without glasses)		
c. Colour Vision		X
d. Any Organic Eye Disease		X
2. Hearing		X
(Unable to hear ordinary conversation at 2 m)		

	Yes/Abnormal	No/Normal
3. Cardiovascular System		
a. Blood Pressure		X
Systolic / Diastolic : 133 / 75 mm Hg		
Pulse : 69 / min		
b. Heart Disease		X
c. Varicose Veins	X	
4. Respiratory System		X
5. Skin-Chronic Disease		X
6. Abdomen		X
7. Locomotor/Neurological	X	
8. Endocrine disorders	X	
9. Mental State		X

LABORATORY TEST

(Report Enclosed)

	Yes/Abnormal	No/Normal
1. Blood Count	X	
2. Urine Feme		X
3. Other Laboratory Test		X

OTHER TEST

(Report Enclosed)

	Yes/Abnormal	No/Normal
1. Audiometry	X	
2. Spirometry	–	–
3. ECG (if indicated)	X	
4. Chest X-Ray		X

Remarks: Mild Tremor R25.1, Mild Hyperhidrosis Palmaris L74.512, Bilateral Varicose Grade 1 I83.9, Visual Field & Whisper Test: Normal, Blood Count: Monocytosis D72.821 8.1%, ECG: Sinus Bradycardia R00.1, Audiometry: Bilateral Conductive Mild Hearing Loss H90.2

CERTIFICATION

I certify that I have examined the abovenamed person. In my opinion, this person is FIT for duties mentioned above.

ADVICE :
Avoid Jobs Which Need to Handle Small Objects, Use Gloves, Legs Exercise, Wear Ear Plug While Working

Authentic Signature

KLINIK MEDILAB BATAM

Date of Exam : 23 September 2024

DR. MARIAMAN TJENDERA, M.KES

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Pre-Employment and Periodic Medical Fitness Certificate of Seafarers

Issued in accordance with Maritime Labor Convention – 2006 as amended, and STCW 1978 as amended regulation I/9 and ILO/WHO Guidelines for conducting pre-sea and periodic medical fitness examinations for seafarers.

Name: (last, first, middle)	PAHLEVI RIZAL	Date of birth (day/month/year)	23/09/1989
Gender: (male/female)	MALE	Nationality:	INDONESIA
Home Address: KAV BUKIT MELATI BLOK F2 NO 32 BATAM			
Passport No. B7245395		Discharge book No:	
Type of Ship: (e.g. container, tanker, passenger, fishing)		Trade Area: (coastal, tropical, worldwide)	
Department: (Deck, Engine, Catering, Other)	CATERING		

Condition	Yes	No	Condition	Yes	No
1. Eye/vision problem		✓	18. Sleep problem	✓	
2. High blood pressure		✓	19. Do you smoke, use alcohol or drugs ?		✓
3. Heart/vascular disease		✓	20. Operation/Surgery		✓
4. Heart Surgery		✓	21. Epilepsy/seizures		✓
5. Varicose veins/piles		✓	22. Dizziness/fainting		✓
6. Asthma/bronchitis		✓	23. Loss of consciousness		✓
7. Blood disorder		✓	24. Psychiatric problems		✓
8. Diabetes		✓	25. Depression		✓
9. Thyroid problem		✓	26. Attempted suicide		✓
10. Digestive disorder		✓	27. Loss of memory		✓
11. Kidney problem		✓	28. Balance problem		✓
12. Skin problem		✓	29. Severe headaches		✓
13. Allergies		✓	30. Ear(hearing, tinnitus) /nose/throat problem		✓
14. Infectious/contagious diseases		✓	31. Restricted mobility		✓
15. Hernia		✓	32.Back or joint problem		✓
16. Genital disorder		✓	33. Amputation		✓
17. Pregnancy		✓	34. Fractures/dislocation		✓

If you answered "yes" to any of the above questions, please give details: 19. Smoke : 1-2 stick/day

Additional questions		
35. Have you ever been signed off as sick or repatriated from a ship ?		✓
36. Have you ever been hospitalized ?		✓
37. Have you ever been declared unfit for sea duty ?		✓
38. Has your medical certificate even been restricted or revoked ?		✓
39. Are you aware that you have any medical problems, diseases or illnesses ?	✓	
40. Do you feel healthy and fit to perform the duties of your designated position/ occupation ?		✓
41. Are you allergic to any medication ?		
Comments:		
42. Are you taking any non-prescription or prescription medications ?		✓

If you answered "yes" to any of the above questions, please give details:

I hereby certify that the personal declaration above is a true statement to the best of my knowledge, I am fully aware that if I withhold any information, this pre-employement examination will be considered null and void. I am aware that the information supplied by me forms the basis upon which I will be offered employment as seafarer. I understand that in the event of any misrepresentation either by statement or omission I will lose the right to benefit from sick pay and/or compensation which would otherwise be due to me under the Contract of Employment or under any Collective Bargaining Agreement. I also hereby consent to my medical records being made available upon demand to my employers and/or owners and/or insurers of the vessel or their authorized representatives. I am aware of the results of this checkup and my right to a review incase the result is unfit or fit with any limitations.

I hereby authorized the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. _____ (the approved medical practitioner).

Date (day/month/year) 23 / 09 / 2024

Signature of examinee: _____

dr. Mariaman Tjendera, M. Kes
Occupational Health Physician

Witnessed by: (Signature) _____

Name: (typed or printed) _____

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Clinical Findings

Height: 189 (cm)	Weight: 76 (kg)
Pulse rate: 69 /(minute)	Rhythm: REGULAR
Blood Pressure: Systolic: 133 (mm Hg)	Diastolic: 75 (mm Hg)

Visual acuity						
	Unaided			Aided		
	Right eye	Left eye	Binocular	Right eye	Left eye	Binocular
Distant	6/6	6/6	6/6			
Near	J1	J1	J1			

Hearing			
	Normal	Normal speech at a distance of 4m	Otoscopy (Tympanic Membrane)
Right ear	✓	NORMAL	NORMAL
Left ear	✓	NORMAL	NORMAL

Visual fields		
	Normal	Defective
Right eye	✓	
Left eye	✓	

Colour Vision	
Normal	Defective
✓	

	Normal	Abnormal		Normal	Abnormal
Head	✓		Varicose veins		✓
Sinuses, nose, throat	✓		Vascular (inc, pedal pulse)	✓	
Mouth/teeth	✓		Abdomen and viscera	✓	
Ear (general)	✓		Hernia	✓	
Eyes	✓		Anus (not rectal exam)	✓	
Ophthalmoscopy	✓		G-U system	✓	
Pupils	✓		Upper and lower extremities	✓	
Eye movement	✓		Spine (C/S, T/S, and L/S)	✓	
Lung and chest	✓		Neurologic (full/brief)		✓
Breast examination	✓		Psychiatric	✓	
Heart	✓		General appearance	✓	
skin	✓				

Other diagnostics tests and results	
Test	Result
Chest X-ray	NORMAL
HIV	NEGATIVE
VDRL	NON REACTIVE
Urinalysis:	Glocose: NEGATIVE Protein: NEGATIVE Blood: NEGATIVE
ECG (if required):	SINUS BRADYCARDIA

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare that the examinee medically:

☑ Fit for look-out duty ☐ Not fit for look-out duty

FIT TO BE DUTY ON BOARD SHIP

	Deck service	Engine service	Catering service	Other service
Fit	☐	☐	☑	☐
Unfit	☐	☐	☐	☐

Without restrictions ☑ With Restrictions ☐ Visual aid required ☐ Yes ☑ No

Describe restrictions (e.g., spesific position, type of ship, trade area)

Medical certificate's date of expiration (day/month/year): 22/09/2026
Date Medical certificate issued (day/month/year): 23/09/2024
Medical practitioner information (name, license number, address):

026.1/001-053/SIP.TM/DPMPTSP-BTM/I/2022

KLINIK MEDILAB BATAM

Signature of Medical Practitioner

dr. Mariaman Tjendera, M. Kes
Occupational Health Physician

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MEDICAL FITNESS CERTIFICATE

Name: RIZAL PAHLEVI		Photo
Sex: Male / Female	Date of Birth: 23/09/1989	
Nationality: INDONESIA	Passport No: E7245395	
Occupation / Rank: MESS BOY / CATERING		
Date of Issue: 23/09/2024		
Date of Expiry: 22/09/2026		
Signature of Holder:		

This is to certify that the lawful holder had been found duly qualified in accordance with Maritime Labor Convention – 2006 as amended, and STCW 1978 as amended regulation 1/9 and ILO/WHO Guidelines for conducting pre – sea and periodic medical fitness examinations for seafarers.

Declaration of the recognized Medical Practitioner:			
Confirmation that identification documents were checked at the point of examination ?	(Yes) / No	Fit for look out duties	(Yes) / No
Hearing meets the standards in section A-1/9 of STCW Code ?	(Yes) / No	Fit for service at sea	(Yes) / No
Unaided hearing satisfactory ?	(Yes) / No	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 ?	(Yes) / No
Visual acuity meets standards in section A-1/9 of STCW Code ?	(Yes) / No		
Color Vision meets standards in section A-1/9 of STCW Code ?	(Yes) / No	Any limitations or restrictions on fitness ? If Yes, please specify	Yes / (No)
Date of last color vision test 23/09/2024			

23/09/2024
Date

KLINIK MEDILAB BATAM

Examining Physician Signature & Stamp
dr. Mariaman Tjendera, M. Kes
Occupational Health Physician

Validity of certificate: 2 years from the date of issue except for persons below 18 years on the date of medical examination where this certificate is valid for 1 year from the date of issue.

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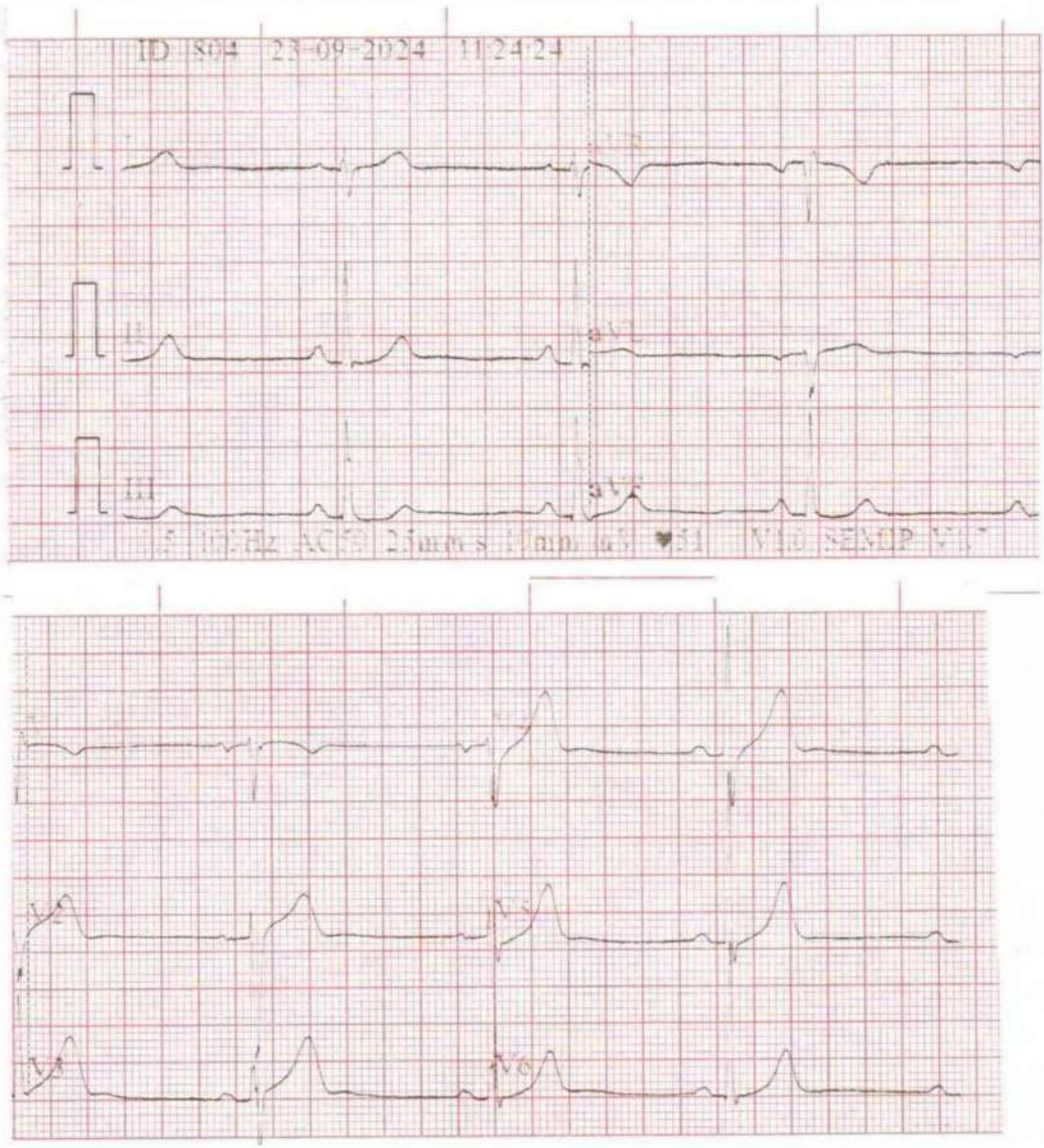
ELECTROCARDIOGRAM INTERPRETATION (RESTING)

Name : RIZAL PAHLEVI
Age : 35 Years
Gender : Male
Place/Date : BATAM/23 September 2024
Company's Name : UMUM



CONCLUSION : Sinus Bradycardia R00.1
ADVICE :
EXAMINER :

dr. Mei Melawati Br. Sihombing
Examining Physician

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HEALTH SCREENING REPORT

Preemployment Physical Examination

134312

CONFIDENTIAL

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Address : KAV BUKIT MELATI BLOK F2 NO 32, BATAM
Occupation : MESS BOY
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : , BATAM

LABORATORY REPORT

Test Name		Result Unit	Reference Range
SEROLOGI			
VDRL / RPR	:	Non Reactive	Non Reactive
HIV	:	Negative	Negative

Date of Exam : 23 September 2024

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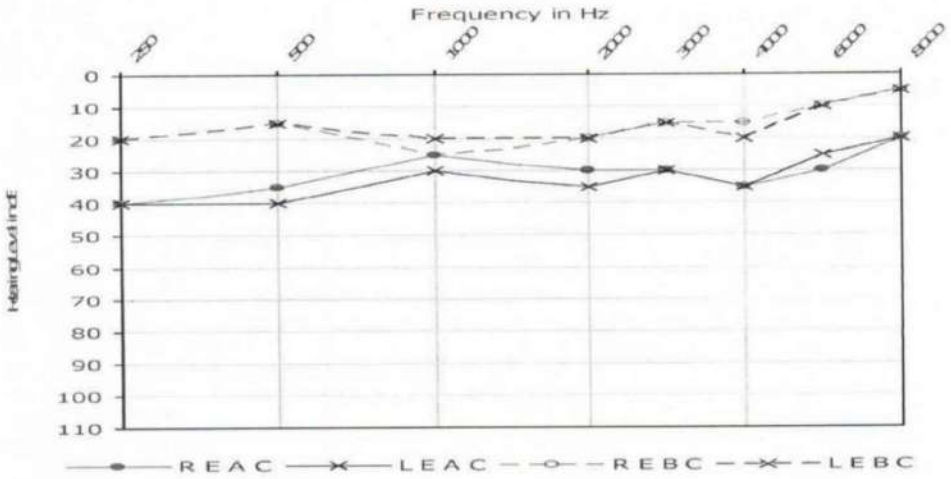
Occupation : MESS BOY
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : BATAM

AUDIOMETRY REPORT

Occupational History	Yes	No
- Noisy Working Environment		X
- Present/use of Hearing Protector		X
- Period of Working	0.0 years	

Medical History/Examination	Yes	No	If Yes, which ear	Left	Right
- Ear Surgery		X			
- Head/Ear Injury		X			
- Ears Infection		X			
- Ear Drum Perforation		X			
- Ear Cerumen		X			



Conclusion :

1. Audiogram : Abnormal : Bilateral Conductive Mild Hearing Loss
2. Hearing Impairment : Monaural : R : 9.38 %
   L : 15.00 %
   Hearing Handicap : 10.313 %
3. Not a Noise Induced Hearing Loss

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