

CURRICULUM VITAE



PERSONAL DETAIL:				
First Name	MOHAMED	Nationality	KENYAN	
Middle Name	HASSAN	Date of Birth	05/12/1989	
Surname	MOTO	Place of Birth	KWALE	
Application for position	WELDER	Religion	ISLAM	
Marital Status	MARRIED	Height, Weight	5FTS, 8CM	
Home Address	MOMBASA-KENYA	Relative Name	RIZIKI KASSIM	
Home Tel No.	+254713278487	Relative Tel No.	+254713278487	
Mobile No.	+254705952963	Shoe Size	34	
Email Address	motomuhammed22@gmail.com	Nearest Airport	MOI INTERNATIONAL AIRPORT-MOMBASA	
Blood Group	B+ (Positive)	Availability Date	ANY TIME FROM NOW	

TRAVELLING DOCUMENTS:				
DOC. TYPE	DOC. NO.	ISSUE	EXPIRY	PLACE
Passport	BK503906	18/09/2023	17/09/2033	MOMBASA
New Seaman Book	14328	05/05/2025	04/05/2030	KMA
Old Seaman Book	008417	30/01/2019	29/01/2024	KMA
Yellow Fever		26/02/2020	LIFETIME	KENYA
Marine Medical certificate	05168	13/03/2025	12/03/2027	KMA

STCW 95/2010 COURSES:				
COURSE No.	CERTIFICATE NO.	ISSUE	EXPIRY	INSTITUTE
Personal Survival Techniques (PST)	BST 13695 (Table A-V1/1-1)	19/05/2025	22/03/2030	KMA
Elementary First Aid (EFA)	BST 13695 (Table A-V1/1-3)	19/05/2025	N/A	KMA
Fire Prevention & Fire Fighting (FPFF)	BST 13695 (Table A-V1/1-2)	19/05/2025	22/03/2030	KMA
Personal Safety & Social Responsibility	BST 13695 (Table A-V1/1-4)	19/05/2025	N/A	KMA
Security Awareness Training For Seafarers	SAT 13554	19/05/2025	N/A	KMA
Designated Security Duties				
Rating Forming Part of An Engine-Room Watch				
Proficiency In Survival Craft And Rescue Boats				
Able Seafarer Engine -Room				
Hydrogen Sulphide Safety (H2S)				

CURRICULUM VITAE

Seafarer Medical Certificate	05168	13/03/2025	12/03/2027	KMA
Ship Security Officer (S.S.O)				
Medical Care Certificate				
CERTIFICATE OF COMPETENCY:&GMDSS GOC WITH FLAG ENDOREMENTS				
GRADE	CERTIFICATE NO.	ISSUE	EXPIRY	AUTHORITY

WORKING EXPERIENCE

RANK	VESSEL NAME	IMO NO.	SIGN ON	SIGN OFF	SHIP TYPE	GRT	KW	COMPANY
Welder	Albacora Cuatro	7325909	16/10/2021	03/05/2022	Purse seiner	2082	2941	CIA Europea De Tunidos S.L
Welder	Albacora Cuatro	7325909	12/05/2021	19/07/2021	Purse Seiner	2082	2941	CIA Europea De Tunidos S.L
Welder Fitter	MV Hailim	7892317	20/09/2019	26/02/2020	Fishing Vessel			
Welder Fitter	MV Haroon	8218859	10/02/2019	30/07/2019	Tug Boat	1813	2942	

Bearer / Mwenye Pasi / Titulaire

Place of Residence / Mahali aishipo / Lieu de Résidence

KINONDO, MBAVU

Height / Urfu / Hauteur

5'8" film 1.73 m/cm

Colour of Eyes / Rangi ya Macho / Couleur des Yeux

BLACK

Special Peculiarities / *Alama yoyote isiyō ya kawaida* / *Particularities Spéciales*

NIL

Profession / Taaluma / Profession

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

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

Signature du Titulaire

Signature de l'Agent des Passeports

REPUBLIC OF KENYA / JAMHURI YA KENYA / REPUBLIQUE DE KENYA

PASSPORT/PASI/PASSEPORT

Type/Area/Type Country Code/Number/ya Nchi/Code du Pa

Passport No./Nambari ya Pasi/Nº de Passeport

P
KEN

BK503906

Sumnaye/Jina la Uko/Nom

MOTO

Given Names/Mojima Aliyepwaf/Prenoms

MOHAMED HASSAN

Nationality/Citizenship/Nationalité

KENYAN

Date of Birth/Tarehe ya Kuzaliwa/Date de Naissance

05 DEC 1989

Place of Birth/Mahali pa Kuzalwa/Lieu de Naissance

M KWALE, KEN

Date of Issue/Tarehe ya Kutolewa/Date de Délivrance

18 SEP 2023

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

17 SEP 2033

Issuing Authority/Mamlaka ya kutoa Pasi/Autorita

GOVERNMENT OF KENYA

Holder's Signature/Sahihi ya Mwenye Pasi/

Signature du titulaire

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[illegible]

BK503906<8KEN8912053M330917327445968<<<<<<72



PERSONAL DETAILS

Surname:	MOTO		
Other name(s):	MOHAMED HASSAN		
Nationality:	KENYAN	Place of Birth (County):	KWALE
Date of Birth:	05 DECEMBER 1989		
Height (Mtrs):	1.73	Gender:	MALE
ID/Passport no:	BK503906	CDC No:	14328
Next of Kin:	Name: RIZIKI KASSIM HUSSEIN	Relationship:	WIFE
Address/ Contact details:	0713278487		
Date of Issue:	05 MAY 2025		
Date of Expiry:	04 MAY 2030		
Signature of holder:			

Issued by Kenya Maritime Authority



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Republic of Kenya

**SEAFARER'S CONTINUOUS DISCHARGE
CERTIFICATE (CDC)
AND
RECORD BOOK**

CDC No. 008417

(Issued in Accordance with Section 125 of the
Merchant Shipping, Act, 2009)

IMPORTANT

- (1) You are informed that this book should be produced and handed to the Registrar of ships or Consular Officer when, signing Articles of Agreement, so that the engagement column may be filled in.
- (2) Should you desert or fail to join, your book will be deposited with the Consular Officer at the Port where you left the ship, who will retain it for two weeks from the date of vessels's Leaving at the end of which time it will be forwarded to the Registrar of Seafarers, Mombasa. upon your applying for your book it may be returned to you containing an entry in the discharge and character columns that the voyage was not completed; but if you have willfully, or through misconduct, failed to join your ship, the Minister may withhold the book for such period as he thinks fit and may refuse to furnish copies of your certificates of discharge.
- (3) Should this book be lost a new one will be issued on application to Kenya Maritime Authority, Mombasa. If the book has been lost by any other cause other than shipwreck or fire on board, a charge will be made for the new book and an inspection fee charged for each entry made in the book.
- (4) **MERCHANT SHIPPING ACT, 2009. SECTION 126 (3)**
Every person who:
 - (a) makes a false report of character under this Act knowing the same to be false;
 - (b) forges or fraudulently alters any certificate of discharge or report of character or copy of a report of character;
 - (c) fraudulently uses any certificate of discharge or report of character, or copy of a report of character which is forged or altered or does not belong to him;

shall be liable on conviction to a fine of not more than one hundred thousand shillings or to imprisonment for a term not exceeding six months or both.

NOTICE

1. This book may be issued only to a person who is a citizen of the Republic of Kenya and who is employed or engaged or ordinarily employed in a sea going employment.
2. Only Registrar of Seafarers or other duly authorized person may make an entry or alteration in this book.

DECLARATION

I DECLARE(I) that the person to whom his book is issued has satisfied me that he is a citizen of Kenya and is entitled to hold the book; and (ii) that the photograph within bearing an official stamp is a true likeness of that person and that the signature and personal description of that person are true.

REGISTRAR OF KENYAN SHIPS & SEAFARERS	
Date issued 30/12/2018	Date of expiry 30/12/2021
Signature of Issuing Officer <i>[Signature]</i> 30 JAN 2019	
Designation of Issuing Officer P.O. Box 95076-80104	
Official Stamp MOMBASA - KENYA	

"RENEWAL ON PAGE 24"

Note: Any person finding this book is kindly requested to hand it in the nearest police station or send it in Kenya Maritime Authority. P.O. Box 95076-80104, Mombasa Kenya.

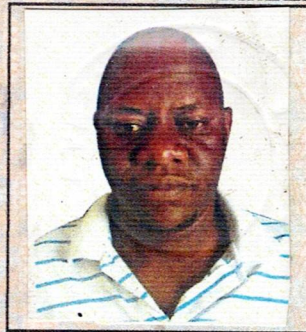
All particulars to be in BLOCK CAPITALS

Surname: MOTO
Other Names: MOHAMED HASSAN
Birth: (a) Date: 1989 (b) Place: KWALE
Colour of (a) Eyes: BLACK
(b) Hair: BLACK
Complexion: DARK BROWN Height: 5.2
Distinguishing Marks (if any): NONE
Nationality: KENYAN
Home Address: P.O. BOX KWALE
KENYA
NEXT OF KIN
Name: HASSAN MOTO
Relationship: FATHER
Address: P.O. BOX KWALE
KENYA

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DESCRIPTION

PHOTOGRAPH OF SEAFARER



R.S
Endossing
stamp

SIGNATURE OF SEAFARER

MOTO

LEFT THUMB PRINT (AND SIGNATURE OF A
WITNESS IF SEAFARER CANNOT WRITE HIS NAME)



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SEAGOING SERVICE RECORD

SEAGOING SERVICE RECORD

POSITION	SHIP'S NAME AND DETAILS	DATE AND		PLACE OF	DESCRIPTION OF	Signature of Master or Registrar of Seafarers
		ENGAGEMENT		DISCHARGE	VOYAGE FOREIGN/HOME	
RANK: STCW REF:	NAME: TYPE: IMO No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OT: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KW: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PREVIOUSLY SERVICE			SEA TIME	
RANK: WELDER FITTER STCW REF:	NAME: MV HAROON TYPE: TUG BOAT IMO No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OT: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KW: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	10/02/2019	MOMBASA	20/07/2019	DURBAN	
RANK: WELDER FITTER STCW REF:	NAME: MV HALLUM TYPE: FISHING VESSEL IMO No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OT: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> KW: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	20/09/2019	MSA	26/02/2020	DAR ESSALAM	

SEAGOING SERVICE RECORD

POSITION	SHIP'S NAME AND DETAILS	DATE AND	
		ENGAGEMENT	
RANK: WELDER STCW REF:	NAME: ALBACORA CUATRO TYPE: PURSE SEINER IMO No. 3325904 OT: 2082 KW: 2941	PORT VICTORIA 12/05/21	
RANK: WELDER STCW REF:	NAME: ALBACORA CUATRO TYPE: PURSE SEINER IMO No. 3325904 OT: 2082 KW: 2941	PORT VICTORIA 16/10/21	
RANK: STCW REF:	NAME: TYPE: IMO No. OT: KW: 		

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SEAGOING SERVICE RECORD

PLACE OF DISCHARGE	DESCRIPTION OF VOYAGE FOREIGN/HOME	Signature of Master or Registrar of Seafarers
PORT VICTORIA 19/07/21	FISHING GROUND	
PORT VICTORIA 03/05/22	FISHING GROUND	

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No. 0037840



REPUBLIC OF KENYA

KENYA MARITIME AUTHORITY

Merchant Shipping (Training and Certification) Regulations 2016

Certificate of Proficiency
BASIC SAFETY TRAINING FOR SEAFARERS

The Government of the Republic of Kenya certifies that,

Name	MOHAMED HASSAN MOTO
Passport/ Id. No	BK503906
Country of Birth	KENYA
Date of Birth	05 DECEMBER 1989
Signature of holder	



has been found duly qualified in

Training	STCW Code	Date of Expiry
Personal Survival Techniques	Table A-VI/1-1	22 March 2030
Fire Prevention and Fire Fighting	Table A-VI/1-2	22 March 2030
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: 19 MAY 2025

Signature:

Name: Fredrick Luke Samba

Certificate No: BST 13695

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 or by making an inquiry to the above address

No. 0037841



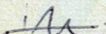
REPUBLIC OF KENYA

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	MOHAMED HASSAN MOTO
Passport/ Id. No	BK503906
Country of Birth	KENYA
Date of Birth	05 DECEMBER 1989
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: 19 MAY 2025

Signature:

Name: Fredrick Luke Samba

Certificate No: SAT 13554

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 or by making an inquiry to the above address.



MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY
STATE DEPARTMENT OF SCIENCE AND TECHNOLOGY
DIRECTORATE OF YOUTH TRAINING

MTONGWE YOUTH POLYTECHNIC

P.O. BOX 16038- MOMBASA
TEL. 0733 271115, 0733 536086
E-mail: mypoly24@yahoo.com



CERTIFICATE

In

Welding Technology

This is to certify that

MOHAMMED HASSAN MOTO

Has participated and successfully completed a Grade III Arc Welder course consisting of Practical training and related theory in Welding Technology as follows:-

- Arc Welding
- Basic Gas Welding
- Metal Work
- General Workshop Safety
- Workshop Organization and Management
- Estimation and Material Selection
- Entrepreneurship

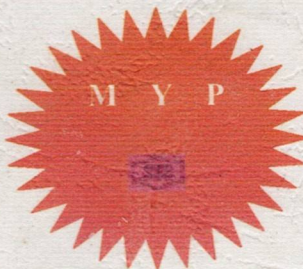
Conducted at

MTONGWE YOUTH POLYTECHNIC

From 23rd February 2013 to 12th December 2014



Head of Department



MANAGER
MTONGWE YOUTH POLYTECHNIC

Manager

REG 00842

MYP/HJK/014

Build Skills for Technological Self Reliance

This certificate was issued without any alterations whatsoever



REPUBLIC OF KENYA

SEAFARER MEDICAL CERTIFICATE

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

Certificate No: M- 05168

SEAFARER INFORMATION

Last name: MOTO		First name: MOHAMED		Middle name(s): HASSAN	
Nationality: KENYAN	Passport No: BK503906	Date of Birth: 05/12/1989		Discharge book No:	
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Rank/Job:		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

DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER

	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): 13/03/2025	<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) : <input type="checkbox"/> Spectacles <input type="checkbox"/> Contact lenses <input checked="" type="checkbox"/> None	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Colour vision meets standards in section A-I/9? Date of last color vision test: 13/03/2025	<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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date of Issue(dd/mm/yyyy): 13/03/2025		Date of Expiry* (dd/mm/yyyy) 12/03/2027
RECOGNIZED MEDICAL PRACTITIONER Sign: Name (print): DR. RISHAD ALI SHOST Place of examination: MOMBASA HOSPITAL Seal/Stamp:		REGISTRAR OF KENYAN SEAFARERS Sign: Name (print): PETER MUNGA Place of issue: MOMBASA Seal/Stamp:

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.



COVID-19 VACCINATION CARD
Ministry of Health, Seychelles

Surname:

MOTO

Sex:

Male

Name(s):

MOHAMED MOTO

DOB:

5/12/89

Nationality:

KENYAN

Add:

KENYA

NIN/Passport:

A 2264031

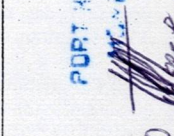

See overleaf for Vaccination details and Card Number

#	Date	Vaccine/Brand	Batch#	Sign/Stamp
1	6/12/21	Sinopharm	HV 0022	Jul
2	12/1/22	Sinopharm	HV 0022	Jul
3				
4				

For queries contact (+248) 4 388 061; Vaccination Card #

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST
YELLOW FEVER
CERTIFICAT INTERNATIONAL DE VACCINATION OU DE REVACCINATION CONTRE
LE FIEVRE JAUNE

This is to certify that MOHAMMED HASSAN MOTO } date of birth 1989 sex M
Je soussigne (c) certifie que }
Whose signature follows }
dont la signature suit }
has on the date indicated been vaccinated or revaccinated against Yellow fever.
a été vacciné (s) ou revacciné (c) contre le fièvre jaune à la indiquée.

Date	Signature and professional status of vaccinator Signature et qualité professionnelle du vaccinateur	Origin and Batch No of Vaccine Origin du vaccin employé et numéro du lot	Official stamp of vaccinating centre Cachet d' officiel du centre de vaccination
26 Febr 2010	 PORT HEALTH OFFICER MOMBASA, KENYA	Stemmar B. 21491	

afficher sa validité.

2			
3			3
4			4

This certificate is valid only if the vaccine used has been approved by the World Health Organization and if the
vaccinating centre has been designated by the health administration for the territory in which that centre is situated.
The validity of this certificate shall extend for a period of ten years, beginning ten days after the date of
vaccination in the event of a revaccination within such period of ten years, from the date of that revaccination.
Any amendment of this certificate, or erasure, or failure to complete any part of it may render it invalid.

Ce certificat n'est valable que si le vaccin employé a été approuvé par l'Organisation mondiale de la Santé et
si le centre de vaccination a été désigné par l'administration sanitaire du territoire dans lequel ce centre est situé.
La validité de ce certificat s'étend pour une période de dix ans commençant dix jours après la date de la vaccination
ou, dans le cas d'une revaccination au cours de cette période de dix ans, le jour de cette revaccination.
Toute correction ou rature sur le certificat ou l'omission d'une quelconque des mentions qu'il comporte peut
affecter sa validité.