


**F1.1****APPLICATION FOR EMPLOYMENT**

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

 PHOTO 3 X 4	<b>1. POSITION APPLIED FOR</b> MASTER	
	<b>2. FAMILY NAME</b> (as in Seaman's Book) <b>BAKHTOGARYEYEV</b>	
	<b>3. FIRST NAME</b> (as in Seaman's Book) <b>DMYTRO</b>	
	<b>4. DATE OF BIRTH</b> (DD.MM.YYYY) <b>11.07.1960</b>	<b>5. PLACE OF BIRTH</b> <b>Ukraine, Odessa</b>
	<b>6. COMPLETE ADDRESS</b> (Only in English). Please indicate an ALTERNATIVE TELEPHONE NUMBER or a NUMBER OF YOUR NEIGHBOURS if the direct line is not available.  <b>15, Akademika Glushko, app.57, Odessa, Ukraine</b>  ☎ <b>+380674853570</b> dmitriyodessa1@outlook.com      e-mail	
<b>7. MARITAL STATUS</b> (Please mark which is relevant). <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower		<b>8. CITIZENSHIP</b> <b>Ukrainian</b>
<b>9. NEXT OF KIN</b> (Please advise compulsorily the following information). a) Relationship <b>wife</b> b) Family Name <b>Serdobintseva</b> c) First Name <b>Olena</b> d) Place of Residence (Please state "THE SAME" if coincides with your permanent address stated above) <b>46/2, Akademika Vilyamsa, app.12, Odessa, Ukraine</b> ☎ <b>+380674853212</b> e-mail		
<b>10. OTHER PERSONAL DATA</b>		
a) Height <b>173</b>	b) Weight <b>84</b>	c) Boots Size <b>42</b>
d) Overall Size <b>54</b>		
e) Color of Eyes <b>brown</b>		f) Color of Hair <b>grey</b>
<b>11. MARITIME EDUCATION</b>		
Educational institution	Specialty	Place
<input type="checkbox"/> Courses <input type="checkbox"/> School <input type="checkbox"/> College <input checked="" type="checkbox"/>	<b>Engineer-</b>	<b>Ukraine,</b>
		Period of Studies From      To <b>1978      1984</b>
<b>12. CERTIFICATES OF COMPETENCY</b>		
Grade / Class/STCW CodeUkraine,	Number	Date of Issue (DD.MM.YY)
Certificate of Competence:	44104/2024	10/12/2024
Endorsement:	44104/2024	10/12/2024
Basic Safety Course (VI/1)	32334224/01/9306/024	01/11/2024
Advanced Fire Fighting (VI/3)	32334224/04/6032/024	05/11/2024
<input checked="" type="checkbox"/> Medical First Aid (VI/4-1) <input checked="" type="checkbox"/> Medical Care (VI/4-2)	32334224/05/5010/024 32334224/06/1752/024	06/11/2024 07/11/2024
Survival Craft and Rescue boats (VI/2-1)	32334224/02/6341/024	04/11/2024
Proficiency in Fast Rescue Boats (VI/2-2)		
Tankerman Oil <input type="checkbox"/> Familiarization <input type="checkbox"/> Advanced		
Tankerman Chemical <input type="checkbox"/> Familiarization <input type="checkbox"/>		
Tankerman Gas <input checked="" type="checkbox"/> Familiarization <input checked="" type="checkbox"/> Advanced	32334224/13/0633/024 32334224/16/0610/024	31/10/2024 31/10/2024
ARPA <input type="checkbox"/> Operational <input checked="" type="checkbox"/> Management	32334224/27/1634/024	11/11/2024

GMDSS General Operator	44023/2024	06/12/2024	06/12/2029	Ukraine
Bridge <input checked="" type="checkbox"/> Engine <input type="checkbox"/> Resource Management	32334224/32/1783/ 024	13/11/2024	13/11/2029	Ukraine
Maneuvering & Ship Handling				
Welder <input type="checkbox"/> Electro <input checked="" type="checkbox"/> Gas <input type="checkbox"/> TIG				
ECDIS	32334224/28/2259 /024	12/11/2024	12/11/2029	Ukraine
Ship Security Officer <input checked="" type="checkbox"/> Designated Security Duties <input checked="" type="checkbox"/>	32334224/08/2768/ 024	14/11/2024	14/11/2029	Ukraine

**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	UKRAINE	KE278667	03/06/1996	
Tourist / Travel Passport	UKRAINE	GK477926	15/10/2024	15/10/2034
Seaman's Book / Seaman's Passport	UKRAINE	AC017136	26/12/2024	26/12/2029
Other Seaman's Book	PANAMA	PA0300404	19/10/2022	04/01/2027
Other Seaman's Book	LIBERIA	EXPIRED		
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	01/11/2024	01/11/2025
Drug & Alco Test Certificate	01/11/2024	01/11/2025
Yellow Fever Vaccination	29/06/2017	FOR LIFE OF PERSON

**15. TESTS**

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)
ASPERO SHIP MANAGEMENT	GAS ORPHEUS	VLGC	PANAMA	44868	12400	mitsubishi	MASTER	21/11/2023	03/06/2024
SKIATHOS MARITIME & TRADING S.A.	SONA	VLGC	PANAMA	44868	12400	mitsubishi	MASTER	03/08/2022	17/08/2023
FULER MARITIME COMPANY S.A.	GAS ROMA	VLPG	PANAMA	44576	12350	MITSIBISHI	MASTER	27/06/2021	30/11/2021
KJP SEAGAS MAJOR LTD	SEAGAS MAJOR	LPG	LIBERIA	4201	2640	B&W	MASTER	11/03/2021	04/05/2021
KJP SEAGAS GOVERNOR LTD	SEAGAS GOVERNOR	LPG	CYPRUS	4658	2870	B&W	MASTER	29/09/2020	12/02/2021
JANUS SHIPPING MANAGEMENT PTE LTD	VULCAN GAS	LPG	LIBERIA	18360	13559	B&W	MASTER	27/05/2019	25/10/2019
BENELUX OVERSEAS INC	EUGENIA GAS	LPG	LIBERIA	11822	5820	B&W	MASTER	09/05/2018	15/12/2018
ANTHONY VEDER	CORAL LOPHELIA	ETHYLENE CARRIER	LIBERIA	5440	4500	B&W	MASTER	05/07/2017	02/10/2017
NAFTOMAR	GAZ CENTURY	LPG	PANAMA	4915	3900	MITSUBISHI	MASTER	08/10/2016	26/01/2017
NAFTOMAR	GAZ FAREAST	LPG	PANAMA	8997	4690	MITSUBISHI	MASTER	11/11/2015	28/04/2015
NAFTOMAR	GAZ FAREAST	LPG	PANAMA	8997	4690	MITSUBISHI	MASTER	02/03/2015	03/07/2015
NAFTOMAR	GAZ FAREAST	LPG	PANAMA	8997	4690	MITSUBISHI	MASTER	18/06/2014	04/11/2014
NAFTOMAR	GAZ SYMPHONY	LPG	PANAMA	8997	4690	MITSUBISHI	MASTER	22/10/2013	10/04/2014
NAFTOMAR	GAZ FAREAST	LPG	PANAMA	8997	4690	MITSUBISHI	MASTER	14/03/2013	26/07/2013

**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 guarantee for such unless proper requirement available. I do also understand that the below assessments of my qualifications and knowledge will affect my ability to be employed via LAPA Ltd.

DATE OF APPLICATION:	<b>03/04/2025</b>	SIGNATURE:
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**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.
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**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:
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Professional Competence Test passed (date):	Score:	Authorized signature:
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