



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

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<b>Position</b>	<b>identity card PIN Number 5Y89359</b>
<b>Position Applied for:</b>	Second Engineer
<b>Date Available from:</b>	-

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<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: BABAK</b>	<b>Last Name: BAGHIRZADE</b>	
Date of Birth: 02.08.1994	Place of Birth (City and Country): Azerbaijan , JALILABAD	
Email: <a href="mailto:babobravo844@gmail.com">babobravo844@gmail.com</a>	Mobile Number: (+994) 50 538 94 56	
Permanent Address: Shiklar village , Masalli, Azerbaijan	Expected Salary Per Month: 3500\$	
Nationality: Azerbaijanian	Alternative rank applying for: 3 <sup>RD</sup> Engineer	
<b>Person to call in emergency: (+994) 55 816 90 88 Brother</b>		

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<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
First Name	Last Name	Gender	Relation	Contact
Ali	Baghirzade	Male	Brother	+994 55 816 90 88

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<b>Maritime Education</b>				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	2013	2019	Bachelor

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<b>Physical Data</b>	
Height	<b>167</b>
Weight	61
Boilersuit Size	S
Shoes Size	39-40
Blood group	A(II)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

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<b>Seaman`s Book &amp; Identify Docs</b>					
DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY

Ship Management  
ISM&ISPS Management  
Ship Agency  
Consultations  
Provision, Ship Supply

Yacht Management  
Technical Management  
Ship Brokering  
Surveying & Monitoring  
New Building & Repair

Sale & Purchasing  
Ship Agency  
Exclusive Cargo Brokering  
Bunker Supply  
Technical Services

**Address:** AZ1075, Azerbaijan, Baku, Yusif Vazir Chemenzemenli 119c, Afen Plaza Business Center 5nd floor, apt 13 **Email:** [crewing@unitedalliancegroup.com](mailto:crewing@unitedalliancegroup.com) **Tel:** +994 51 277 19 31

Seaman Book	Azerbaijan	DQK 024755	24.08.2023	Azerbaijan	24.08.2028
Certificate of Competency	Azerbaijan	0007189	20.02.2024	Azerbaijan	20.02.2029
Republic of Azerbaijan	Azerbaijan	C01600857	25.04.2017	Azerbaijan	24.04.2027
Do you hold a US Visa 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry Date: -
Do you hold a US Visa 'B1/B2'?	YES/NO	NO	Issue Date:	-	Expiry Date:-
Have you been rejected for any visa applied for?	YES/NO		NO		
If YES, please state the country and reasons			-		

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## Professional Test

Professional Test Date	Name of Test	Score
-	-	-

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## License

Name	Issuing Country	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

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## STCW Certificates &amp; Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-3096-19	SMPA	19.12.2019	13.12.2024
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-4385-24	SMPA	22.11.2024	22.11.2029
ELEMENTARY FIRST AID	Azerbaijan	SO-4385-24	SMPA	22.11.2024	22.11.2029
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-4385-24	SMPA	22.11.2024	22.11.2029
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-4385-24	SMPA	22.11.2024	22.11.2029
International Safety Management	Azerbaijan	SP-3448-24	SMPA	10.10.2024	10.10.2029
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-3288-24	SMPA	24.09.2024	24.09.2029
Security Awareness Training For All Seafarers	Azerbaijan	SI-3761-24	SMPA	19.09.2024	Unlimited
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-3058-24	SMPA	19.09.2024	Unlimited
Passenger safety , cargo safety, and hull integrity training	Azerbaijan	-	SMPA	-	-
Leadership & Teamwork	Azerbaijan	DL-0621-24	SMPA	07.10.2024	04.10.2029
Advanced Training in Fire Fighting	Azerbaijan	SJ-1092-24	SMPA	24.10.2024	24.10.2029
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-1360-24	SMPA	19.12.2024	06.12.2029
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	SB-0110-25	SMPA	17.07.2025	17.07.2030
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan	AS-0165-24	SMPA	28.11.2024	28.11.2029
Medical First Aid	Azerbaijan	SN-0350-25	SMPA	01.07.2025	Unlimited
Engine Resource Management	Azerbaijan	ER-0375-24	SMPA	13.12.2024	13.12.2029
Dangerous , hazardous and harmful cargoes	Azerbaijan	SK-0917-25	SMPA	17.07.2025	17.07.2030
Crisis management and human behaviour training	Azerbaijan	-	SMPA	-	-
Ship's Gas Analysers and Their Operation	Azerbaijan	ST-0009-23	SMPA	06.02.2023	06.02.2028
Crowd management training	Azerbaijan	SC-0187-21	SMPA	05.10.2021	05.10.2026
1000 Voltage	Azerbaijan	DM-0213-24	SMPA	29.11.2024	29.11.2029

Ship Management  
ISM&ISPS Management  
Ship Agency  
Consultations  
Provision, Ship Supply

Yacht Management  
Technical Management  
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Surveying & Monitoring  
New Building & Repair

Sale & Purchasing  
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**For Engineers (Please provide details)**

Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

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**Other Experience**

Azerbaijan Language : Native

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**Travel Documents**

Name	YES/NO	Country	Date pf Expire
Schengen	YES/NO	NO	-
US	YES/NO	NO	-
China	YES/NO	NO	-
Australia	YES/NO	NO	-

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**Insurance ,Health Related Documentation**

Medical Certificate (Fit for Duty)	YES/NO	YES
<b>Vaccination</b>		
Yellow Fever	YES/NO	NO
COVID-19	YES/NO	YES

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

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**Medical history**

Have you ever signed off a ship due to medical reasons?	YES/NO	NO
Have you undergone any operation in the past?	YES/NO	NO
Have you consulted a doctor during the last 12 months for an illness/accident?	YES/NO	NO
Do you have any health or disability problems now?	YES/NO	NO
Do you take any medications regularly?	YES/NO	NO

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

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**General**

Have you ever been the subject of a court of enquiry or involved in a maritime accident?	YES/NO	NO
Have you ever had a professional license suspended or revoked?	YES/NO	NO

(If YES, please give full details and attach a separate page if necessary)

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**References** *(Please give the name and address of your current or immediate past employer)*

Name of company	1.--	2.-
Name of person to contact	-	-
Address	-	-
☎ No.	-	-

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**Declaration**

I hereby declare that the above particulars are true and authorize you to contact the referees listed above.

I have read it, I am familiar with it, I confirm with my signature.

Date: 25.07.2025

Signature

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