## **APPLICATION FORM**

**Date Available from:ANY TIME** 



					1	V	L	U	Y	X	4
Personal ID Number											

**Position Applied for: OILER** 

FirstName
DateofBirth
Cityofliving
PhoneNumbers

	ata								
Family Nam NAJAFOV	e.	First Name:	First Name: FIRUZ			Middle Name: FAZIL			
Date of Birth	: 05.05.1983	Place of Birth: A MASALLI	ZERBAIJAN	,	Citizenship: AZEBAIJANIAN				
Permanent A	ddress: AZE	ERBAIJAN, reg	ion. MASAI	LI	Phone	(Home): NO (Business/ Mol: firuzncfov10	obile): <mark>+994706562854</mark> @gmail.com		
2. Maritimel	Education								
Nameofs		Country	Town	Fr	om	To	Type of degree or diploma		
AZERBA IST.SER	•	AZERBAIJAN	BAKU	12.01	.2024	12.07.2024	6 Month		
131.3LK	VIGES								
3. Profession	alTest								
EnglishTestDate			NameofTest			Score			
ProfessionalTes	tDate		NameofTest			Score			
ProfessionalInte	rviewDate		Result						
4. FamilyDet	tails								
4. FamilyDet Civil Status(Single,	tails , Married, Separate	ed, Divorced, Widowed	i): SINGLE						
Civil Status(Single,	, Married, Separate	ed, Divorced, Widowed				Relationship	/ friend		
Civil Status(Single,	, Married, Separaterst emergency con	ntact): ALIYEV SULI					/ friend 94506694224		
Civil Status(Single, Next of Kin (the fir	, Married, Separaterst emergency con	ntact): ALIYEV SULI							

5. IdentityDocuments									
Document	Country	Number	PlaceofIssue	IssueDate	ExpiryDate				
Seaman'sBook	AZERBAIJAN	AZE034389	State Maritime Administration	27.08.2024	27.08.2029				
TravelPassport	AZERBAIJAN	C04001677	AZERBAIJAN	06.12.2023	05.12.2033				

6. ValidVisa		
CountryorUnion	Type	ValidUntil

		Da			
Document	Number	Issue	Expiry	Place	
CertificateofCompetency	RP15751	19.08.2024	Expiry	State Maritime Administra	
			00.04.2025	ion	
WELDER. ELECTROD MMA	MES-JV	09.04.2024	09.04.2027	ISC SERVICE	
MalteseEndorsementof COC					
OilTankerEndorsement					
ChemicalTankerEndorsement					
GasTankerEndorsement					
Advanced training for oil tanker cargo operations					
Chemical Tanker Familiarization Training					
GasTankerFamiliarizationTraining					
OilTankersSpecializedTraining					
Chemical Tanker Specialized Training					
GasTankerSpecializedTraining				Ct t No. 11	
BasicTrainings	SO-2387-24	24.06.2024	29.05.2029	State Maritime Administra ion	
Proficiency in Survival Craft and Rescue Boats	SL-2114-24	28.06.2024	11.06.2029	State Maritime Administra ion	
AdvancedFireFighting					
MedicalFirstAidTraining					
Medical First Aid Training and Medical Care					
RO-ro					
Crisis management and human behavior training					
RadarObservation&Plotting					
Automatic Radar Plotting Aids Simulator (ARPA					
BridgeTeamManagement					
Shiphandling&Maneuvering					
Ship Security-related familiarization security-aw	CT 2407 24	06.06.2024		State Maritime Administra	
areness training	SI-2407-24	06.06.2024		ion	
MalteseEndorsementof SSO					
ISM Code	SP-2526-24	07.08.2024	30.05.2029	State Maritime Adminis	
SafetyOfficer					
ECDISTrainingCourse					
RiskAssessmentCourse					
C.O.W./ I.G.S					
FirePracticeonTankers					
WELDER(Elektrod-MMA)		09.04.2024		AZERBAIJAN	
UnmannedMachinerySpace					
FRAMO FamiliarizationCourse					
Cargo Ballast Operations on Oil/Chemical Tanke					
rs					
Engine resoursce management					
Leadership and Teamwork					
High woltage					
Risk Management And Incident Investigation					
Training of seafarers with designated security dut ies	SH-2076-24	05.07.2024		State Maritime Administra	
Dangerous hazardous and harmfull cargoes				1011	

BasicTraining and qualifications on oil and cher cal tanker cargo operations	ni SA-0635-24	17.07.2024		State Mar	itime Administrat	
om many on go operations		<u>I</u>	<u> </u>			
8. PhysicalData	180					
Height	178					
Weight	75					
ColourofHair	Black					
ColourofEyes	Chestnut 42					
BoilersuitSize	XL					
ShoesSize	AL					
0.24.1.177.4				<b>T</b> 7	<b>.</b>	
9. MedicalHistory	1' 1 0			Yes	No	
Have you ever signed off a ship due to med					+	
Did you undergo any medical operation in		n illnaaa/s =	oidont?		+	
Have you consulted a doctor during the last Do you have any health or disability problem.		ııı ıııness/ac	ccident!		+	
Do you have any health or disability proble	ems now?				+	
If yes, please give full details:						
	Passed:		Validti	11:		
InternationalMedicalExamination	09.07.2025			9.07.2027		
VaccinationAgainstYellowFiver						
VaccinationAgainstDiphtheria						
, we think to he is guilled in the interest of						
10. References (please give name and address of your of	current or past employer)		Officerema	rks		
NomoofCommony					1	
Name of company						
Name of person to contact Address						
Phone						
1 HOHE						
NameofCompany						
Name of person to contact						
Address						
Phone						
11. Bankaddressforallotments						
Beneficiary						
AccountNo.						
NameofBank						
BankAddress						
40.77						
12. Knowledgeandexperience			Yes		No	
OCIMF vettingexperience:		+				
ISGOT knowledge:						
13. I hereby declare that the above, inclu	ıding Medicəl H	listory is to	riie			

Place

14. ForOfficeuseonly	

## 15. SeagoingExperience

Nameofves sel	Flag	Vessel 's Ty pe	DW T	Manageror Owner	Rank	From d/ m/y	To d/m/	Tota l m/d
MORNOVA	AZE	Dry cargo	2500	Azerbaijan c ompany	cadet	12.04.2024	12.07.2024	3 month
DG ZARA H	BLE	G/C	3254	EYTA SHIPPI NG	OILER	30.12.2024	24.06.2025	
M/V AYSTA R	TUVA LU	GEN C ARGO	3254	KARAKA SHI PPING	OILER WELD ER	29.12.2024	24.p 06.2024	

## Total rank sea service:

## **Total** type of vessel sea service:

Rank	Years	Typeofvessel	Years
		OIL TANKER	
		LPG	
		DRY CARGO	
		TANKER ICE	
		OIL /CHEMICAL T	
		ANKER	
		FERRY	
Total		Total:	