



APPLICATION FORM

1	Position	identity card PIN Number 64CF3JJ					
	Position Applied for:	Able Seafarer-Engine					
	Date Available from:	-					

Personal Information	Gender: Male
First Name: NIJAT	Last Name: HASANALIYEV
Date of Birth: 20.05.1996	Place of Birth (City and Country): Azerbaijan, KHACHMAZ
Email: nicat20051996@gmail.com	Mobile Number: (+994) 50 770 63 36
Permanent Address: Jabir Novruzov str, Khachmaz dist , Azerbaijan	Expected Salary Per Month:
Nationality: Azerbaijan	Alternative rank applying for:
Person to call in emergency: (+994) 55 962	03 39 Brother

3	Family Details: (If Unmarried kindly give details of Father / Mother)							
	First Name	Last Name	Gender	Relation	Contact			
	Rauf	Hasanaliyev	Male	Brother	+994559620339			

4	Maritime Education				
	Name of school	Country	From	То	Type of degree or diploma

Physical Data	
Height	176
Weight	65
Boilersuit Size	M
Shoes Size	43
Blood group	A(II)RH+
Additional Physical Information:{You can write any	other information you want to add about your physique in this field.}

6	Seaman's Book & Identify Docs							
	DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY		
	Seaman Book	Azerhaijan	DOK 031317	02 04 2025	Azerhaijan	02 04 2030		

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

Certificate of Competency	Azerbaijan	RP09218		08.10.2018	Azerba	nijan	08.10.2028
Republic of Azerbaijan	Azerbaijan	C02139075		25.07.2018	Azerbaijan		24.07.2028
Do you hold a US Vis	YES/NO	NO	Issue Date:	-	Expiry	Date: -	
Do you hold a US Vis	YES/NO	NO	Issue Date:	- Expiry Date:-		Date:-	
Have you been reject	ed for any visa app		YES/NO	NO			
If YES, please state the	ne country and reas		-				

7 Professional Test

Professional Test Date	Name of Test	Score
-	-	-

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 & Trainings								
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry			
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-1219-25	SMPA	25.07.2025	23.07.2030			
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1219-25	SMPA	25.07.2025	23.07.2030			
ELEMENTARY FIRST AID	Azerbaijan	SO-1219-25	SMPA	25.07.2025	23.07.2030			
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1219-25	SMPA	25.07.2025	23.07.2030			
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1219-25	SMPA	25.07.2025	23.07.2030			
International Safety Management	Azerbaijan	SP-0928-25	SMPA	04.07.2025	03.07.2030			
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1065-25	SMPA	25.07.2025	23.07.2030			
Security Awareness Training For All Seafarers	Azerbaijan	SI-0817-25	SMPA	04.07.2025	Unlimited			
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0777-25	SMPA	04.07.2025	Unlimited			

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

Seagoing Experience

(Please give a full record starting with the last vessel on which you served)

COMPANY	Name of vessel	Flag	Vessel's Type	DWT	Eng Type	GRT	TEU	Rank	From m/d/y	To m/d/y	Total m/d	REASONS FOR S/OFF
SAMAYA SHIPPING LTD	M/V SILVER STAR	Azerbaijan	General Cargo Ship	3332	Skoda	3086	-	Motorman	20.10.2018	25.02.2019	4 months 5 days	End of Contract
SAMAYA SHIPPING LTD	M/V BAKU - 357	Azerbaijan	Ore/Oil Carrier	3280	SKL	2615	C_{E}	Motorman	20.07.2019	28.02.2020	7 months 8 days	End of Contract
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Sale & Purchasing Ship Agency Exclusive Cargo Brokering **Bunker Supply Technical Services**

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11	For Engineers (Please provide details)						
		-					
	Generators						
	Purifiers and Boilers	-					
	Type of Crapes / No of						

Other Experience

Reefer Containers

Azerbaijan Language; Native Turkish Language: Good

Travel Documents 12

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

Insurance ,Health Related Documentation 13

Medical Certificate (Fit for Duty)	YES/NO	YES
Vaccination		
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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Name of company	1.		2.
Name of person to contact			
Address			
☎ No.			
Declaration			
I have read it, I am familiar wi	th it, I confirm with my signat	ure.	
	_		
		Date:	

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

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