



Application Form

Section 1		Navigation Officer	
<i>Position Applied for</i>	Ordinary Seaman		
<i>Lowest Position Acceptable</i>	Ordinary Seaman		
<i>Date of Availability</i>	Any time		
Section 2		Personal Details	
<i>Family name / Surname</i>	Sediyev		
<i>First Name / Given Name</i>	Yusif		
<i>Date & Place of Birth</i>	Date: 24.11.1998 Place: Khachmaz Azerbaijan		
<i>Nationality</i>	Azerbaijani		
<i>Permanent Address</i>	Azerbaijan, Khachmaz region,		
<i>Present Address</i>	Azerbaijan, Khachmaz		
<i>Present Contact Number</i>			
<i>Mobile Number</i>	+994 51 870 44 71		
<i>Email Address</i>	yusif.sediyev98@gmail.com		
<i>Nearest Airport (and Distance)</i>	Haydar Aliyev Baku International (GYD)		
Section 3		Passport and VISA details	
<i>Country of Issue</i>	Azerbaijan / Baku	<i>USA Visa - Type</i>	
<i>Date Issued</i>	04.03.2025	<i>USA VISA Expires</i>	
<i>Place Issued</i>	Azerbaijan	<i>USA Visa - Type</i>	
<i>Passport Number</i>	C05172893	<i>USA VISA Expires</i>	
<i>Passport –Expires</i>	03.03.2035	<i>Other Country Visa</i>	
<i>Secondary passport or Dual nationality</i>	N/A	<i>Visa Expiry</i>	
Section 4 (hi-light as required)		Seaman book / Discharge book / Seaman Record Book / CDC	
<i>Issuing Country & Place</i>	Azerbaijan	<i>Date Issued</i>	19.02.2025
<i>Number</i>	DQK 031037	<i>Expiry Date (if any)</i>	19.02.2030
Section 5		Language knowledge	
Language	Weak	Good	Best
Azerbaijani			✓
Turkish			✓
Russian			✓
English	✓		

Section 6	Next of Kin – this is important information we require- Don't ignore it
Full Name / Relationship	Sediyev Mikayil, father
Any dependents / Children (incl age)	Not any
Address	Khachmaz Azerbaijan
Contact Numbers	+994 50 378 93 21

Section 7 STCW95 Highest Certificate of Competency / Licence Held (also list Flag State Endorsements)					
<i>Class / Grade/Capacity</i>	<i>Issuing Country</i>	<i>Certificate No.</i>	<i>Date Issued</i>	<i>Expiry</i>	<i>Details of Limitations</i>
Rating forming part of a navigational watch	Azerbaijan, Baku	0138 /25	10.02.2025	-----	A-II/4

Section 8 STCW95 related Courses Attended and Certificates Obtained					
Name of Course / Certificate	STCW Code	Place	Issue Date	Cert No	Expiry Date
Mandatory minimum requirements for familiarization, basic safety training and instruction for all seafarers	A-VI/1-1, A-VI/1-2, A-VI/1-3, A-VI/1-4	Baku, Azerbaijan	06.09.2024	SO-3416-24	06.09.2029
Proficiency in survival craft and boats other than fast rescue boats	A-VI/2-1,2,3,4	Baku, Azerbaijan	09.09.2024	SL-3033-24	09.09.2029
Proficiency in Fast Rescue Boats	A-VI/2-1,2,3,4	Baku, Azerbaijan			
International safety Management Code	SOLAS IX	Baku, Azerbaijan	12.09.2024	SP-3147-24	12.09.2029
Ship Security-related training and instructing	A-IV/6, 1-4	Baku, Azerbaijan	18.09.2024	SI-3707-24	-----
Training for seafarers with designated security duties	A-IV/6-2	Baku, Azerbaijan	13.09.2024	SH-2920-24	-----

Section 9 OFFSHORE INDUSTRY COURSES					
Please enter below any other certificates held or courses done, ie offshore, DP certs etc or Any other not already mentioned					
Name of Course / Certificate	APPROVALS	Place	Issue Date	Cert No	Expiry
BOSIET					
HUET					
FOET					
OFFSHORE MEDICALS (UK, NORWAY or NETHERLAND)	UNIKILINKIA	Baku, Azerbaijan	11.05.2024		11.05.2026

LIST ALL OTHER COURSES

Section 10 Medical History		
	YES	NO
Have you ever signed off a ship due medical reason?		x
Have you undergone any medical operations in past?		x
Have you consulted a doctor during the past 12 months for an illness / Accident		x
Do you have any health or disability problem now?		x
If answer to any of above is YES then give further details below or on a separate sheet		
Section 11 General		
	Yes	No
Have you ever been the subject of a court of enquiry or involved in a maritime accident		x
Have you ever had a professional licence suspended or revoked		x
Have you ever been convicted of any criminal offence?		x
Have you ever been dismissed		x
If yes to any of above then please full details below or on separate sheet of paper		
<u>Section 12 Declaration</u>		
I hereby declare that the above particulars are true and I authorize you to contact the referees listed above And confirm that All my certificates / Licences are Authentic / SEASERVICE RECORD is ACCURATE / And I confirm accepting Companies DRUG & ALCOHOL Policy		

