



APPLICATION FORM

1	Position	identity card PIN Number 6H4K34D
	Position Applied for:	Rating forming part of a navigational watch
	Date Available from:	-

Personal Information	Gender: Male
First Name: TURAL	Last Name: IBADOV
Date of Birth: 06.11.1998	Place of Birth (City and Country): Azerbaijan, GUBA
Email: turalibadov1998@gmail.com	Mobile Number: (+90) 544 184 55 29
Permanent Address: Sabatlar village, Guba district ,Azerbaijan	Expected Salary Per Month: 1450\$-1500\$
Nationality: Azerbaijan	Alternative rank applying for:-

3	Family Details: (If Unmarri	ed kindly give details of Fath	er / Mother)		
	First Name	Last Name	Gender	Relation	Contact
	Movlud	Ibadov	Male	Father	+994555929661

4	Maritime Education				
	Name of school	Country	From	То	Type of degree or diploma
	Kainat Maritime MMC	Azerbaijan	-	-	Course

Physical Data	
Height	176
Weight	73
Boilersuit Size	L
Shoes Size	42-43
Blood group	O(I)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	Azerbaijan	DQK 030769	08.01.2025	Azerbaijan	08.01.2030

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

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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 Tel: +994 51 277 19 31

Seaman Book	Panama	PA0:	312436	08.09.2022	Pan	ama	08.07.2027
Certificate of Competency	Azerbaijan	RP	10294	03.02.2021	Azerl	oaijan	-
Republic of Azerbaijan	Azerbaijan	C03:	374654	14.07.2021	Azerl	oaijan	13.07.2031
Welder Certificate	Azerbaijan	MES-	JV/31253	23.01.2025	Azerl	oaijan	-
Do you hold a US Vis	a 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	a 'B1/B2'?	YES/NO	NO	Issue Date:	-	Expiry	Date:-
Have you been reject	ed for any visa app	lied for?		YES/NO	NO		
If YES, please state the	ne country and reas	sons		-			

Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8 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-1498-25	SMPA	26.09.2025	26.09.2030
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-1498-25	SMPA	26.09.2025	26.09.2030
ELEMENTARY FIRST AID	Azerbaijan	SO-1498-25	SMPA	26.09.2025	26.09.2030
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-1498-25	SMPA	26.09.2025	26.09.2030
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-1498-25	SMPA	26.09.2025	26.09.2030
International Safety Management	Azerbaijan	SP-1600-25	SMPA	26.09.2025	26.09.2030
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1440-25	SMPA	26.09.2025	26.09.2030
Security Awareness Training For All Seafarers	Azerbaijan	SI-1360-25	SMPA	22.09.2025	Unlimited
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1432-25	SMPA	22.09.2025	Unlimited
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0650-23	SMPA	03.08.2023	11.07.2028

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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
LIDER SHIPPING	M/V LIDER ILYAS	Panama	Ro-Ro Cargo Ship	4860	Semt- Pielstic k	7362		Ordinary Seaman	06.08.2021	15.03.2022	7 months 9 days	End of Contract
GN GROUP	M/V ATLANTIC POWER	Panama	AHTS	1575	-	1943	-	Able Seaman	05.07.2022	05.01.2023	6 months	End of Contract
VIYA SHIPPING MANAGEME NT	M/V KLAUSEN	Panama	General Cargo Ship	2324	MAK	1559	C E	Able Seaman	13.02.2023	25.07.2023	5 months 12 days	End of Contract
OPTIMAL SHIPPING	M/V SEA ARIES	Belize	General Cargo Ship	3737	-	2614	-	Ordinary Seaman	21.09.2023	05.04.2024	6 months 17 days	End of Contract
GN GROUP	M/V TIBER RIVER	Panama	General Cargo Ship	7403	-	5880	-	AB/Fitter	01.08.2024	15.01.2025	5 months 15 days	End of Contract
T-SHIPPING LIMITED	M/V EAGLE 1	Tanzania	Bulk Carrier	18320	B&W	11194		Able Seaman	13.02.2025	12.09.2025	6 months 30 days	End of Contract
			13									

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

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

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11 For Engineers (Please provide details
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Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

12 Other Experience

Azerbaijan Language : Native English Language : Intermediate Russian Language ; Intermediate

12 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	-

13 Insurance ,Health Related Documentation

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)

14 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)

15 (

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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16	References (Please give the r	name and address of your current or immediate pa	ast employer)
	Name of company	1_	2 -

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

17	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: 09.1	10.2025
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Signature

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