



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position	identity card PIN Number 7B2NDER
Position Applied for:	Able Seafarer Deck
Date Available from:	-

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Personal Information	Gender: Male
First Name: NURLAN	Last Name: GOYUSHOV
Date of Birth: 19.11.2000	Place of Birth (City and Country): Azerbaijan, YEVLAKH
Email: captainate1@gmail.com	Mobile Number: (+994) 50 961 40 16
Permanent Address: Mingachevir district, Azerbaijan	Expected Salary Per Month: 1400\$-1600\$
Nationality: Azerbaijan	Alternative rank applying for: -
Person to call in emergency: (+994) 50 870 43 57 Father	

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Chingiz	Goyushov	Male	Father	+994555140532

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	2018	2022	Bachelor
Azerbaijan University of Architecture and Construction	Azerbaijan	2022	2024	Master

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Physical Data	
Height	178
Weight	65
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.}	

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 Tel: +994 51 277 19 31

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Seaman`s Book & Identify Docs

DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 029237	06.08.2024	Azerbaijan	06.08.2029
Certificate of Competency	Azerbaijan	RP10785	25.09.2024	Azerbaijan	-
Republic of Azerbaijan	Azerbaijan	C02684533	28.08.2019	Azerbaijan	27.08.2029
Do you hold a US Visa 'C1/D'?		YES/NO	NO	Issue Date:	-
Do you hold a US Visa 'B1/B2'?		YES/NO	NO	Issue Date:	-
Have you been rejected for any visa applied for?			YES/NO	NO	Expiry Date:-
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 & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-3124-24	SMPA	16.08.2024	16.08.2029
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-3124-24	SMPA	16.08.2024	16.08.2029
ELEMENTARY FIRST AID	Azerbaijan	SO-3124-24	SMPA	16.08.2024	16.08.2029
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-3124-24	SMPA	16.08.2024	16.08.2029
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-3124-24	SMPA	16.08.2024	16.08.2029
International Safety Management	Azerbaijan	SP-2796-24	SMPA	26.08.2024	26.08.2029
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-2853-24	SMPA	23.08.2024	22.08.2029
Security Awareness Training For All Seafarers	Azerbaijan	SI-3418-24	SMPA	27.08.2024	Unlimited
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-2767-24	SMPA	30.08.2024	Unlimited
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0797-24	SMPA	19.08.2024	Unlimited
Global Maritime Distress and Safety System general operator	Azerbaijan	DQ-0212-22	SMPA	16.03.2022	13.01.2027
Radar, ARPA, bridge teamwork and search and rescue	Azerbaijan	SQ-0135-22	SMPA	09.03.2022	06.01.2027
Operational Use of Electronic Chart Display and Information Systems (ECDIS)	Azerbaijan	SZ-0131-22	SMPA	02.03.2022	17.01.2027

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

[illegible]

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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
 Turkish Language : Good
 English Language : Intermediate
 Russian Language : Intermediate

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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
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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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: 20.10.2025

Signature

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