



## **APPLICATION FORM**

Position	identity card PIN Number 1ESSQPR				
Position Applied for:	Chief Engineer				
Date Available from:	-				
Personal Information	Gender: Male				

Personal Information	Gender: Male			
First Name: ANAR	Last Name: HASANOV			
Date of Birth: 25.06.1985	Place of Birth (City and Country): Azerbaijan, MASALLI			
Email:-	Mobile Number: (+994) 51 531 00 96			
Permanent Address: B.Mammadov str , Masalli district ,Azerbaijan	Expected Salary Per Month: 8000\$			
Nationality: Azerbaijan	Alternative rank applying for: -			
Person to call in emergency: (+994) 51 599 00 96 Brother				

3	Family Details: (If Unmarried kindly give details of Father / Mother)							
	First Name	Last Name	Gender	Relation	Contact			
	Tural	Hasanov	Male	Brother	+994515990096			

4	Maritime Education								
	Name of school	Country	From	То	Type of degree or diploma				
	Azerbaijan State Marine Academy	Azerbaijan	2003	2007	Bachelor				

Physical Data						
Height	170					
Weight	80					
Boilersuit Size	L					
Shoes Size	42					
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 & Id	Seaman's Book & Identify Docs							
	DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY			

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

5

Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair Sale & Purchasing Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

Seaman Book	Azerbaijan	DQK 024362		12.07.2023	Azerbaij	jan	12.07.2028
Certificate of Competency	Azerbaijan	0005106		14.07.2021	Azerbaijan		14.07.2026
Republic of Azerbaijan	Azerbaijan	C02271387		07.03.2019	Azerbaijan		06.03.2029
Seaman Book	Panama	PA0180392		10.01.2022	Panama		14.07.2026
Do you hold a US Vis	a 'C1/D'?	YES/NO	NO	Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	YES/NO NO		Issue Date:	-	Expiry	Date:-	
Have you been rejecte	YES/NO	NO					
If YES, please state the country and reasons				-	·		

**Professional Test** 

<b>Professional Test Date</b>	Name of Test	Score
-	-	-

8 License

Name	Issuing Country	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

9

STCW Certificates & Trainings					
Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNICS	Azerbaijan	SO-2475-22	SMPA	01.06.2022	23.05.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-2475-22	SMPA	01.06.2022	23.05.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-2475-22	SMPA	01.06.2022	23.05.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-2475-22	SMPA	01.06.2022	23.05.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-2475-22	SMPA	01.06.2022	23.05.2027
International Safety Management	Azerbaijan	SP-1570-22	SMPA	27.05.2022	12.05.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-1466-22	SMPA	31.05.2022	13.05.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-2131-23	SMPA	11.07.2023	10.07.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1675-23	SMPA	14.07.2023	11.07.2028
1000 Voltage	Azerbaijan	DM-0111-22	SMPA	02.06.2022	02.06.2027
Leadership & Teamwork	Azerbaijan	DL-0873-22	SMPA	27.05.2022	03.05.2027
Advanced Training in Fire Fighting	Azerbaijan	SJ-0661-22	SMPA	24.05.2022	06.05.2027
Medical First Aid	Azerbaijan	SN-1113-23	SMPA	14.07.2023	14.07.2028
Engine-room resource management	Azerbaijan	ER-0201-24	SMPA	10.07.2024	05.07.2029

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

## **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
MEDKON SHIPPING	M/V MEDKON KRM	Panama	General Cargo Ship	5820	MAN	3893	-	Chief Engineer	15.09.2023	03.06.2024	8 months 19 days	End of Contract
MEDKON SHIPPING	M/V MEDKON KRM	Panama	General Cargo Ship	5820	MAN	3893	CE	Chief Engineer	27.08.2024	16.01.2025	4 months 22days	End of Contract
MIRA SHIPPING & T.S.A	M/V GAIA	Palau	Container Ship	9821	N&W	7260	-	Chief Engineer	09.02.2025	14.05.2025	3 months 5 days	End of Contract
				1								
				-\\								

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

11	For Engineers	(Please provide details)

	-
Generators	
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

**Other Experience** 

Azerbaijan Language: Native Russian Language: Good English Language : B1

12 Travel Documents

Traver became to				
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

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)

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** 

16	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.	-	-

17	Declaration
• •	2001

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:	23.10.2025

Signature

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