



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position	identity card PIN Number 1AWFG0J
Position Applied for:	Electro -Technical Officer
Date Available from:	-

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Personal Information	Gender: Male
First Name: FIKRAT	Last Name: BAYRAMOV
Date of Birth: 22.04.1972	Place of Birth (City and Country): Azerbaijan, BILASUVAR
Email: bfukrat070@gmail.com	Mobile Number: (+994) 70 787 11 71
Permanent Address: P.Hasimov street, Khatai district, Home 80	Expected Salary Per Month: 5000\$
Nationality: Azerbaijan	Alternative rank applying for: -
Person to call in emergency: (+994) 55 566 81 90 Wife	

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Sharafat	Bayramova	Female	Wife	
Elnur	Bayramzada	Male	Son	070 527 37 73

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	1987	1991	Bachelor

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Physical Data	
Height	165
Weight	80
Boilersuit Size	XXL
Shoes Size	42
Blood group	O(I)RH-
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

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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

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	Azerbaijan	DQK 025185		26.09.2023	Azerbaijan		26.09.2028
Certificate of Competency	Azerbaijan	0000965		15.04.2022	Azerbaijan		25.02.2027
Republic of Azerbaijan	Azerbaijan	C03083393		11.01.2020	Azerbaijan		10.01.2030
Do you hold a US Visa 'C1/D'?		YES/NO	NO	Issue Date:	-	Expiry Date: -	
Do you hold a US Visa 'B1/B2'?		YES/NO	NO	Issue Date:	-	Expiry Date:-	
Have you been rejected for any visa applied for?				YES/NO	NO		
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	Place Issued	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-0497-22	UAG	10.02.2022	04.02.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0497-22	UAG	10.02.2022	04.02.2027
International Safety Management	Azerbaijan	SP-3704-23	UAG	27.11.2023	22.11.2028
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0844-22	UAG	13.04.2022	07.04.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-0013-24	UAG	08.01.2024	08.01.2029
Security Training For Seafarers With Designated Security Duties	Panama	TC-0006-DSD-041	CTC	27.09.2024	12.09.2029
Crowd management training	Azerbaijan	SC-0190-23	UAG	17.08.2023	17.08.2028
Leadership & Teamwork	Azerbaijan	DL-1168-21	UAG	17.11.2021	17.11.2026
Advanced Training in Fire Fighting	Azerbaijan	SJ-0239-22	UAG	25.02.2022	25.02.2027
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0887-23	UAG	31.10.2023	20.10.2028
Updating	Azerbaijan	XS-0313-22	UAG	25.02.2022	25.02.2027
1000v	Azerbaijan	DM-0003-24	UAG	19.01.2024	19.01.2029
Medical First Aid	Azerbaijan	SN-0153-22	UAG	14.02.2022	14.02.2027

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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

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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: 14.11.2025

Signature

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