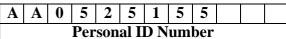
APPLICATION FORM





| Position Applied for: SAILOR | | | | | | | Date Available from: ANY TIME | | | | |
|------------------------------|-------------------------|--------------|---------------|---|-------------------------|----------------|--|------------------|---|-----------------|--|
| 1. Personal l | Data | | | | | | | | | | |
| | pata ne: MIRZAZA | DA | First | Name: VA | FADAR | Midd | le Name: | | | | |
| Taimy Nam | | <i>D</i> 11 | riist | ranic. V1. | II / ID/III | Wildu | ic i tailic. | | | | |
| Date of Birth | : 10.09.2001 | | | Place of Birth (City and Country):Azerbaijan. Astara | | | Citizenship: AZERBAIJANIAN | | | | |
| Permanent A | ddress: Astara | , Ruda | kanar | , 11101 | | | Phone Mobile: +994771457177 E-mail: vafadarmirzazada@icloud.com | | | | |
| 2. Maritime | Education | | | | | | | | | | |
| | Name of school | To w n | | Country | From | | То | Туј | oe of deg | gree or diploma | |
| | | BAK | XU Azerbaijan | | 18.07.2024 22 | | .01.2025 | ED CER | SECONDARY EDUCATION CERTIFICATE: № RM 142/25 | | |
| | | | | | | | | | | | |
| 3. Profession | nal Test | | | | | | | | | | |
| English Test Da | ate | | | Name of Te | est | | | | | | |
| Professional Te | st Date | | | Name of Te | est | | | | | | |
| Professional Int | erview Date | | | Result | | | | | | | |
| 4. Family De | etails | | | | | | | | | | |
| • | , Married, Separated, I | Divorced, V | Widowed) | : | | | | | | | |
| Next of Kin (MIRZAYEV | | | | | Relationship: FATHER | | | | | | |
| Address of Re | sidence Astar | a, Arch | ivan v | illage | | | Phone: +9 | 94518640 | 890 | | |
| | Daughter | So | n | | | | | | | | |
| Family Name | | | | | | | | | | | |
| First Name | | | | | | | | | | | |
| Date of Birth | | | | | | | | | | | |
| City of living | | | | | | | | | | | |
| Phone Numbers | | | | | | | | | | | |
| | | | | | | | | | | | |
| 5. Identity D | ocuments | | | | • | | , | | | | |
| Document | Count | ry | N | lumber | | Place Issue | | Issue | Date | Expiry Date | |

| Certificate of competency | Azerbaijan | RP172 | 81 | Azerbaijan State Maritime Administration (SMA) | | 11.08.2025 | |
|-----------------------------|------------|-------|-------|---|-------------|------------|------------|
| Seafarers identity document | Azerbaijan | AZE03 | 37193 | Azerbaijan State Maritime Administration (SMA) | | 28.08.2025 | 28.08.2030 |
| Seaman Book | Azerbaijan | DQK0 | 32336 | Azerbaijan State Maritime Administration (SMA) | | 28.08.2025 | 28.08.2030 |
| Travel Passport | Azerbaijan | C0374 | 3017 | 17 MIA | | 01.11.2022 | 31.10.2032 |
| Civil Passport | Azerbaijan | AA052 | 5155 | Astara RPSH | | | 08.04.2029 |
| 6. Valid Visa | | | | | | <u>'</u> | |
| Country or Union | | | Type | | Valid Until | | |
| N/A | | | N/A | | N/A | | |
| N/A | | | N/A | | N/A | | |

| 7. Courses Attended and Certificates Obtained | | | | | | | |
|---|------------|------------|------------|------------|--|--|--|
| Document | Number | Da | ites | Place | | | |
| | Nullibei | Issue | Expiry | Tiace | | | |
| Certificate of Competency | | | | | | | |
| Basic training and qualifications on oil and | SA-0236-25 | 04.06.2025 | | Azerbaijan | | | |
| chemical tanker cargo operations | SA-0230-23 | 04.00.2023 | | Azerbarjan | | | |
| Safe operation and maintenance of high voltage | | | | | | | |
| systems 1000 volts or more | | | | | | | |
| Training for seafarers with designated security | | | | | | | |
| duties | | | | | | | |
| Ship Security-related training and instruction | | | | | | | |
| Engine resource management | | | | | | | |
| Passenger safety,cargo safety and hull integrity | | | | | | | |
| training Dengangus hazardays and harmfull agraces | | | | | | | |
| Dangerous hazardous and harmfull cargoes Inert Gas system | | | | | | | |
| Advanced training for oil tanker cargo operations | | | | | | | |
| Gas Analysers and Their Operation | | | | | | | |
| Proficiency in Survival Craft and Rescue Boats | SL-0784-25 | 04.06.2025 | 04.06.2030 | Azorbaijan | | | |
| Advanced Fire Fighting | SL-0704-23 | 04.00.2023 | 04.00.2030 | Azerbaijan | | | |
| Medical First Aid Training | | | | | | | |
| <u> </u> | | | | | | | |
| Medical First Aid Training and Medical Care | | | | | | | |
| Leadership and Teamwork | | | | | | | |
| GMDSS General Operator | | | | | | | |
| GMDSS Endorsement | | | | | | | |
| Radar Observation & Plotting | | | | | | | |
| Automatic Radar Plotting Aids Simulator (ARPA) | | | | | | | |
| Bridge Team Management | | | | | | | |
| Shiphandling& Maneuvering | | | | | | | |
| Ship Security-related Training and instruction | SI-0749-25 | 24.06.2025 | | Azerbaijan | | | |
| Operational Use of Electronik Chart Display and | | | | | | | |
| information Systems | | | | | | | |
| Crowd management training | | | | | | | |
| Crisis management and human behaviour training | | | | | | | |
| Training and qualification for ro-ro passenger ship | | | | | | | |
| International Safety Management Code | SP-0852-25 | 25.06.2025 | 20.06.2030 | Azerbaijan | | | |
| Ship Security Officer | | | | | | | |
| Training for seafarers with designated security duties | SH-0772-25 | 04.07.2025 | | Azerbaijan | | | |
| -personal survival techniques –fire prevention | | | | | | | |
| avdfire fighting –elementary first aid –personal safety and social responsibilities | SO-1010-25 | 13.06.2025 | 11.06.2030 | Azerbaijan | | | |
| sarcty and social responsibilities | 1 | | | | | | |

| Height | 174 cm. | | | | | | | |
|--|-----------------------------|--------------------------|------------|----------|----|--|--|--|
| 85 | | 75 k.g | | | | | | |
| Colour of Hair | Black | | | | | | | |
| Colour of Eyes | Brown | | | | | | | |
| Boilersuit Size | | XL | | | | | | |
| Shoes Size | | | | | | | | |
| 9. Medical History | | | | Yes | No | | | |
| Have you ever signed off a ship | | | | | No | | | |
| Did you undergo any medical or | | | | | No | | | |
| Have you consulted a doctor dur | | | /accident? | | No | | | |
| Do you have any health or disab | ility prob <mark>l</mark> e | ems now? | | | No | | | |
| If yes, please give full details: | | | | | | | | |
| | | Passed: | Valid | till: | | | | |
| International Medical Examinati | | N 7/A | **** | | | | | |
| Vaccination Against Yellow Fiv | er | N/A | N/A | | | | | |
| Vaccination Against Diphtheria | | N/A | N/A | \ | | | | |
| | | | | | | | | |
| 10. References (please give name and a | ddress of your c | urrent or past employer) | Office rem | arks | | | | |
| Name of Company | | ijan Caspian Shipping | | | | | | |
| Name of person to contact | • | V | | | | | | |
| Address | Azerba | ijan | | | | | | |
| Phone | | | | | | | | |
| 11 D. J. J. J. C. W. | 1 | | | | | | | |
| 11. Bank address for allotment | LS | | | | | | | |
| Beneficiary Account No. | | | | | | | | |
| Name of Bank | | | | | | | | |
| Bank Address | | | | | | | | |
| Dalik Address | | | | | | | | |
| 12. Knowledge and experience | | | Yes | | No | | | |
| OCIMF vetting experience: | | | | | + | | | |
| ISGOT knowledge: | | | | | + | | | |
| 13. I hereby declare that the al | ove, inclu | ıding Medical History, i | s true | | | | | |
| Place: | | Signature | | | | | | |
| | | | | | | | | |
| 14. For Office use only | | | | | | | | |
| 14. For Office use only | | | | | | | | |
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| | | | | | | | | |

8. Physical Data

15. Seagoing Experience

| Name of vessel | Flag | Vessel's Type | DWT | Eng Type | HP | Manager or Owner | Rank | From d/m/y | To d/m/y | Total m/d |
|----------------|------|------------------|-----|----------|----|------------------|------|------------|-------------|--------------|
| | | | | | | | | | | |
| | | | | | | | | | | |
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Total rank sea service:

| Rank | |
|-------|--|
| | |
| | |
| | |
| | |
| | |
| | |
| Total | |

Total type of vessel sea service:

| ~ <u>~</u> | |
|----------------|--|
| Type of vessel | |
| PASSENCER SHIP | |
| | |
| DRY CARGO | |
| | |
| | |
| | |
| Total: | |
| | |