

APPLICATION FORM



1

Position

Position applied for:	Junior Engineer/4 th Engineer		
Are you willing to accept any other positions?	YES / NO	If YES, which positions would you consider?	
Readiness From	23.05.2023	Last drawn Wages	1950 \$

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Personal details

Name:	Last Name (as per passport) Plechii		First Name (as per passport) Ivan	
Place of birth:	Ukraine	Kherson reg.	Nationality:	Ukrainian
Height in cms.	182	Weight in Kgs	84	Color of eyes
Color of Hair	Brown	Boiler suit size	52	Shoe size
Food Habit	European			
Permanent Address:	Ukraine, Kherson reg., vlg. Davidiv Brid, Pidgirna str. 21			
Post code:	74120			
Skype ID:		No.:	(Country) (Area) (Number)	
Mobile No.:	(Country) (Area) (Number)	E-Mail Id:	plechiv@gmail.com	

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Education Background

	Name	From Year	To Year	Highest Qualification Attained
School	Davidivobrids`ka School	2003	2014	Secondary Education
College	Kherson State Maritime	2014	2019	Master Degree
Pre-Sea Training				
Other Qualifications	BSM Cyprus Training Centre	2019	2019	Junior Officers Training Course

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Identity documents

DOCUMENT	COUNTRY	NUMBER	ISSUED	PLACE	EXPIRY(dd/mm/yyyy)
Travel Passport:		FE286047	17.03.2016	Kherson	17.03.2026
Seaman's book:	National	AB566198	18.11.2015	Kheson	30.09.2025
	Bahamian				
	Liberian	1826764	10.07.2023	R.L. Dulles, Virginia, USA	10.07.2028
	Panamanian				
	Other - Norway				
National Id.		Yellow fever	Lot No.	916	Date of Validity
Do you hold a US Visa 'C1/D'?		N6690810	Date of Issue	03.10.2018	Date of expiry
Do you hold Australian MCV			Date of Issue		Date of expiry
Have you been rejected for any visa applied for?	NO	If YES, please state the country and reasons			

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Family details

Next of Kin	Plechii Yevea	Relationship	Wife
Name:	Last Name (as per passport)		First Name (as per passport)
Address:	Ukraine, Kherson, Visokosna str. 12		
	+380956727708		Post code: 73000
Contact telephone numbers:	1st.	(Country) (Area) (Number)	2nd (Country) (Area) (Number)
Marital Status:	Married	Date of Birth of Spouse:	20.12.2000
Names of Children		Sex	Date of Birth (DD/MM/YYYY)

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National Certificate of Competency / Certificate of Proficiency (highest certificate held)

Class/Grade	Issuing Country	Certificate No.	Date Issued	Place Issued	Valid Until
Third-class endinner	Ukraine	01168/2018/11	25.07.2018	Kherson	27.06.2023
GMDSS					

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National TANKER Endorsements (Management / Operation / Support)

	Endorsement Type	Certificate No.	Date Issued	Place Issued	Valid Until
Petroleum					
Liquefied Gas	Basic	00185/2020/1	13.02.2020	Kherson	05.02.2023
Chemicals					

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Flag State Certificates Of Endorsement (Issued by countries such as Panama, Liberia, Bahamas, etc)

Class	Issuing Country	Certificate No.	Date Issued	Place Issued	Valid Until

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Flag State Equivalent TANKER Endorsements (Issued by countries such as Panama, Liberia, Bahamas, etc)

Country/Type	Certificate No.	Date Issued	Place Issued	Valid Until

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Certificates (STCW and Value added)

Course	Institution	Place	Date	Cert. No.
Safety familiarization, basic training and instruction for all seafarers	Training center "Alfa-Training"	Kherson	30.11.2020	25/2020/368
Advance Fire Fighting	Education-training complex «Admiral» LLC	Odessa	30.05.2023	00423/2023
Medical First Aid	Education-training complex «Admiral» LLC	Odessa	30.05.2023	00294/2023
Medical Care				
Proficiency in Survival Craft - PSCRB	Training center "Alfa-Training"		01.12.2020	26/2020/315
Security Awareness Training for Seafarers with Designated Security Duties	Training centre «Admiral»	Kherson	16.03.2021	2355
Ship Security Officer				
Ship Safety Officer Course				
Gas Carrier Familiarization	Ukraine Seafarers Training Centre Kherson Branch	Kherson	21.01.2020	73
Advance Gas Carrier Course	Ukraine Seafarers Training Centre Kherson Branch	Khesron	21.01.2020	44
Oil Tanker Familiarization				
Advance Oil Tanker Course				
Chemical Tanker Familiarization				
Advance Chemical Tanker Course				
Bridge Team Management				

BRM / VRM / BERM / ERM	Ukraine Seafarers Training Centre Kherson Branch	Kherson	21.01.2020	54
Ship Handling Simulator				
Ships' Catering Services (Messman)				
Certification for Cook (MLC 2006)				
ECDIS - generic				
ECDIS - type specific				
High Voltage				

VESSEL NAME	COMPANY#	VESSEL TYPE / YEAR BUILT	FLAG	DWT	GRT	MAIN ENGINE##		B.H.P.	RANK	SIGN-ON DATE DD/MM/YYYY	SIGN-OFF DATE DD/MM/YYYY	SEATIME Y-M-D
						Make	Type					
Mineral Dragoon	Anglo-Eastern	2008	Belgium	178062	91373	MAN B&W	6S70MC	22610	Eng.Cadet	04.12.2016	30.06.2017	0-6-26
Vega Sea	BSM	2017	Liberia	50591	46250	MAN B&W	6G60ME-C	16120	Eng.Cadet	05.11.2018	21.05.2019	0-6-16
GasChem Pacific	Harpain Gas	2009	Liberia	18919	13879	Wärtsilä-Sulzer	6RT-Flex 50	13035	Oiler	09.07.2020	29.10.2020	0-3-20
Kaprijke	Exmar	2015	Antwerpen	29639	25952	MAN B&W	6S50ME-B	8560	Wiper	08.05.2021	03.12.2021	0-6-25
Kontich	Exmar	2016	Antwerpen	29461	26261	MAN B&W	6S50ME-B	8560	App. Engineer	11.09.2022	05.02.2023	0-4-25
Oceanic Star	RTC	2009	Liberia	26416	22978	MAN B&W	6S50MC-C	9480	Oiler	14.06.2023	03.11.2023	0-4-18

Please ensure that the full name and address of your immediate past employer is entered in Section 12

Required for engineer applicants only

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Medical history

Have you ever signed off a ship due to medical reasons?		
Have you undergone any operation in the past?		
Have you consulted a doctor during the last 12 months for an illness/accident?		
Do you have any health or disability problems now?		

(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?		
Have you ever had a professional licence suspended or revoked?		
Do you have any Criminal record or have any investigation is going on		

(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		
Name of person to contact		
Address		
☎ No.	(Country) (Area) (Number)	Post Code: (Country) (Area) (Number)

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References *(Please list two contactable referees or past employers in addition to Section 11)*

Name of company		
Name of person to contact		
Address		
☎ No.	(Country) (Area) (Number)	Post Code: (Country) (Area) (Number)

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Automatic review

If immediate employment is not available, do you wish to be considered for future vacancies?		
If YES, please give any alternative contact details not shown in Section 2		

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Declaration

I hereby declare that the above particulars are true and authorise you to contact the referees listed above.
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Name/Signature

Date: _____ (dd/mm/yyyy)