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| **South Star Ltd.**  D:\Downloads\Untitled-2.png | | | **D:\Рабочий стол\bureau veritas.jpgApplication Form**  Position Applied for:  2ndChoise: | | | | | | | | | | | | | | Photo | | | | |
| **PERSONAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | |
| SURNAME | | |  | | | | | | | | | | | | | | | | | | |
| GIVEN NAME | | |  | | | | | | | | | | | | | | | | | | |
| FATHER’S NAME | | |  | | | | | | | MARITAL STATUS | | | | | |  | | | | | |
| DATE OF BIRTH | | |  | | | | | | | NUMBER OF CHILDREN | | | | | |  | | | | | |
| PLASE OF BIRTH | | |  | | | | | | | NEXT OF KIN | | | | | |  | | | | | |
| CITIZENSHIP | | |  | | | | | | | RALATION | | | | | |  | | | | | |
| ADRESS | | |  | | | | | | | NEXT OF KIN ADRESS | | | | | |  | | | | | |
| PHONE | | |  | | | | | | | PHONE | | | | | |  | | | | | |
| **EDUCATION** | | | | | | | | | | | | | | | | | | | | | |
| **NAME OF SCHOOL** | | | | **CITY** | | | | | | **GRADYATED** | | | | | | **TYPE OF CTGREE RECEIVED** | | | | | |
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|  | | | | **№** | | | | **ISSUED** | | | | | | **VALID** | | | | **PLACE OF ISSUED** | | | |
| SEAMANS’S BOOK | | | |  | | | |  | | | | | |  | | | |  | | | |
| INTERNATIONAL PPT | | | |  | | | |  | | | | | |  | | | |  | | | |
| **LICENCES** | | | | **GRADE** | | | | | | **NO.** | | | | | **ISSUED** | | | | | **VALID** | |
| NATIONAL LICENCE | | | |  | | | | | |  | | | | |  | | | | |  | |
| ENDORSMENT | | | |  | | | | | |  | | | | |  | | | | |  | |
| GMDSS | | | |  | | | | | |  | | | | |  | | | | |  | |
| ENDORSMENT | | | |  | | | | | |  | | | | |  | | | | |  | |
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| **STCW CERTIFICATE** | | **№** | | | | **ISSUED** | **VALID** | | | | **STCW CERTIFICATE** | | | | **№** | | | | **ISSUED** | | **VALID** |
| Fire prevention & fire fighting, Personal Safety and Social Responsibility, elementary 1st aid and personal Survival Techniques **(A-VI/1)** | |  | | | |  |  | | | |  | | | |  | | | |  | |  |
|  | | | |  | | | |  | |  |
| Advance Fire Fighting **(A-VI/3)** | |  | | | |  |  | | | |  | | | |  | | | |  | |  |
| Survival craft/Rescue Boat **(A-VI/2 1 to 4)** | |  | | | |  |  | | | |  | | | |  | | | |  | |  |
| Medical first Aid **(A-VI/4-1)** | |  | | | |  |  | | | |  | | | |  | | | |  | |  |
| Medical Care on board **(A-VI/4-2)** | |  | | | |  |  | | | |  | | | |  | | | |  | |  |
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| HEALTH CERTIFICATE DATE | | | | | | |  | | | | YELOW FEVER | | | | | | | | | |  |
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| **VISAS** | | | | | | | | | | | | | | | | | | | | | |
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| **BIOMETRIC DATA** | | | | | | | | | | | | | | | | | | | | | |
| HEIGH |  | | | | EYES | | | |  | | | | SHOESIZE | | | | | | |  | |
| WEIGHT |  | | | | HAIR | | | |  | | | | SIZECLOTHING | | | | | | |  | |

**SEA SERVICE**

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| --- | --- | --- | --- | --- | --- | --- |
| **Vessels** | **Vesseltype** DWT | **M/E Type**  **BHP** | **Enginemodel**  **RPM** | **ShipManagers**  **Vessel'sFlag** | **Rank** | **Period Total** |
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**Reason for leaving last company:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I confirm all that all above given information are true and any fake will

cause immediate termination of the employment

**Seaman’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_**