**Applied Company:**

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| **Personal Data** | *AFFIX HERE YOUR RECENT PASSPORT SIZE PHOTOGRAPH* |
| First Name | Middle Name | Last Name / Surname |
| Nationality | Date Of Birth (dd/mm/yy) | Place of Birth |
| Position Applied For  | [ ]  Female [ ]  Male | Available date |

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| Home Address / departure airport  | **Personal Documents** | Issued on | Valid until |
| Passport (Country / Number) |  |  |
| Seaman’s book |  |  |
| USA C1/D visa |  |  |
| Telephone | Schengen Visa |  |  |
| E-Mail | Medical Fitness Certificate |  |  |

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| **National Certificates of Competence** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Tanker Endorsements** Management level [ ]  Operation level [ ]  |
| Grade | Issued | Expires | Oil | Chemical | Gas |
|  COC |  |  |  |  |  |
| Endorsement |  |  |  |  |  |
| Valid Flag State Endorsements | Liberia [ ] , Panama [ ] , Malta [ ] , Marshall Islands [ ] , UK [ ] , Singapore [ ]  Norway (NIS) [ ] , Italy [ ]  Other (list flags) [ ]   |
| GMDSSGeneral /Restricted |  |  | Flag State GMDSS Endorsements (list) |

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| **Other valid certificates and training attended** |
| [ ] Basic Safety Training [ ] Advanced Fighting [ ] Medical First Aid [ ] Medical Care [ ] ECDIS (Generic)[ ] Ship Security Officer [ ] Bridge Team Management [ ]  Ship Handling [ ]  Liquid Cargo Handling [ ]  ER Management [ ] ECDIS (Type Specific) [ ]  Other (specify)  |
| **Education History**: Name of Institution / Level / Graduate Date:  |

**Please answer the following questions:**

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| * Did you suffer, or presently suffer from, any disease likely to render you unfit for services at sea or likely to endanger the health of other persons on board?

 If yes, please provide details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  [ ] YES [ ] NO |
| * Did you suffer any accident, which rendered you temporary and/or partially disabled?
 | [ ] YES [ ] NO |
| * Did you ever undergo psychiatric treatment
 | [ ] YES [ ] NO |
| * Are you addicted to alcohol or drugs of any kind?
 | [ ] YES [ ] NO |

*I hereby declare that the above facts and information are true and accurate. I further consent to the holding and processing by (i) the owners of any vessel on which I may be assigned from time to time and (ii) the Managers and any direct or indirect parent or subsidiary or associated or affiliated company of the Managers (together referred to as "the Companies") for the purposes of my employment, of personal data about me contained herein, or provided to any of the Companies at a later date, including with respect to personal and pensions administration, employee management and as required to comply with any laws, regulations or contracts applicable to any of the Companies or their businesses. I understand that this data will be stored in the Managers’ database for the purposes of my current or future employment arranged by the Managers. Further, I confirm that the above may involve the transfer of my personal data within the Managers’ organization*.

**Place**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Office Use Only**

*Initial assessment of applicant for further recruitment*

*Comments*

*Responsible person*

*Name / Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Sea Experience :** *(List the most recent experience first; use additional sheets as required)*

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| **Company** | **Flag** | **Vessel Name/Imo number**  | **Type (1)** | **GRT** | **DWT** | **Main Engine/2 or 4 stroke**  | **BHP** | **Rank** | **Date From**(dd/mm/yy) | **Date To**(dd/mm/yy) | **Reason for S/off (3)** |
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| \*Please use only following abbreviations for the vessel type: **GCD** General Cargo **MLP** Multi-Purpose **B/C** Bulk Carrier **CON** Container **O/O** Ore Oil **OBO** Ore/Bulk/Oil**TNC** Tanker Crude **TNP** Tanker Product **TNV** VLCC/ULCC **CHM** Chemical Tanker **LPG/LNG** Gas Tanker **FSO / FPSO** **PAS** Passenger Ship **R/O** Ro/Ro **DRG** Dredger **NVL** Naval Ship **H/L** Heavy Lift**OSV** Offshore Supply **SRV** Survey vessel **LOG** Log/Timber **SSHL** Semi-Submergible **MOB** Mobile Offshore Unit  |

(1) Use only the following abbreviations for vsl types:

(2) Engineers to give make/model of engines, e.g. “MAN 14V52/55A” or “SULZER 5RTA58”

(3) Reason of Sing Off, e.g. “EOC – End of Contract”, “MED – Medical Ground”, “OWN – Own request”

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| **Please provide details of two recent employers who we may contact for references** |
| Name of Company |  |  |
| Name of person to contact |  |  |
| Address |  |  |
| Telephone/E-Mail |  |  |