

Part A. APPLICATION FORM

PERSONAL DATA

Applied for the position of:		PHOTO
Surname:	Forename:	
Father's name:	Mother's name:	
Date of birth:	Place of birth:	
Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married	Nationality:	
Home address:		
Tel.:	Tel.:	e-mail:
Next of kin:		
Surname:		Forename:
Home address:		Tel:
Dependants (number):	Sons:	Daughters:

DOCUMENTS	NUMBER	ISSUING AUTHORITY	Date Issued	Expiry Date
Passport				
Seaman's book				
S T C W Endorsement/ COC				
Medical Fitness Certificate				
Yellow Fever Vaccination				

QUALIFICATIONS (ref. to CMSM COMP-13 Appendix V-1 as applicable)

	DECK										ENGINE						CATERING		
	MANAGEMENT		OPERATIONAL		SUPPORT						MANAGEMENT		OPERATIONAL			SUPPORT			
	MST	C/O	2/O	3/O	BSN	A/B	O/S	D/C	P/M	C/E	2/E	EL/EL	3/E	4/E	FTR	OLR	E/C	COOK	M/M
FLAG AND NATIONAL CERTIFICATES / DOCUMENTS / ENDORSEMENTS																			
Seaman's book	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Medical examination record	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Drug and Alcohol examination record	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Passport	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Visa	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Yellow fever / Vaccination book (as applicable)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
National licence (C.O.C.)	X	X	X	X					X	X				X	X				
Flag Endorsement	X	X	X	X					X	X				X	X				
NAVIGATION AND ENGINEERING WATCH																			
Navig. watchkeeping A-II/1			X	X															
Navig. watchkeeping A-II/2	X	X																	
Navig. watchkeeping A-II/4					Opt.	X													
E/R watchkeeping A-III/1												Opt.	X	X					
E/R watchkeeping A-III/2										X	X								
E/R watchkeeping A-III/4																X			
GMDSS operators A-IV/2	X	X	X	X															
EMERGENCY, OCCUPATIONAL SAFETY, MEDICAL CARE AND SURVIVAL FUNCTIONS																			
Basic training* A-VI/1-1 to 1-4	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
General Tanker Familiarisation A-V/1.8 to 1.14	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Specialised Tanker Safety A-V/1.2	X	X	X	X					X	X				X	X				
Proficiency in survival craft and rescue boats, other than fast rescue boats* A-VI/2-1	X	X	X	X	X	Opt.			X	X	X		X	X					
Advanced fire fight* A-VI/3-1	X	X	X	X					X	X			X	X					
Medical care* A-VI/4-1,2	X	X																	
ADDITIONAL (NON-STATUTORY) TRAINING																			
Ship Security Officer*	X	X	Opt.	Opt.															
Safety Officer*		X																	
Bridge Team/Resource Management*	X	X	X	X															
Engine Resource Management*										X	X		X	X					
Risk assessment*	X	Opt.	Opt.	Opt.					X	Opt.			Opt.	Opt.					
Incident investigation*	X	Opt.	Opt.	Opt.					X	Opt.			Opt.	Opt.					
ECDIS 1*	X	X	X	X															
Ship handling 2	X																		

1 If crew is to board vessel equipped with ECDIS
2 A Master with less than 3 Years sea service in rank, must have attended a ship handling course (In the event that the Master has in excess of 10 years experience, the Certificate is not needed). Chief Officers to be promoted to Master shall attend this course, prior taking over their new duties.
* Refresher every 5 Years

CERTIFICATES	YES	NO	ISSUING AUTHORITY	Date Issued	Expiry Date
Certificate of competence / licence					
Navigational watchkeeping A-II/1					
Navigational watchkeeping A-II/2					
Navigational watchkeeping A-II/4					
Engine Room watchkeeping A-III/1					
Engine Room watchkeeping A-III/2					
Engine Room watchkeeping A-III/4					
GMDSS radio operators A-IV/2					
Basic training A-VI/1-1 to 1-4					
Tanker familiarisation course A-V/1-1 to 1-7					
Oil tanker training program A-V/1-8 to 1-14					
Proficiency in surv.craft & RB other than FRB A-VI/2-1					
Advanced fire fighting A-VI/3-1					
Medical care A-VI/4-1,2					
Ship Security Officer					
Safety Officer					
Bridge Resource/Team Management (BRM/BTM)					
Engine Resource Management (ERM)					
Risk Assessment					
Incident Investigation					
Ship handling					
OTHER CERTIFICATES	YES	NO	ISSUING AUTHORITY	Date Issued	Expiry Date

Training needs If NO list the certificates the applicant does not hold in the following section:

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Native language:

English: Good Basic

Other languages:

PREVIOUS SEA SERVICE								
SHIP'S NAME	TYPE	ENGINE	DWT / BHP	OWNER	RANK	SERVICE TIME		REASON OF SIGN-OFF
						DATE ON	DATE OFF	

APPLICANT (NAME): SIGNATURE DATE

CREW MANAGER APPLICATION REVIEW (application's validity to be reviewed prior each employment)

NAME	DATE	SIGNATURE