|  |  |  |  |
| --- | --- | --- | --- |
| ***EMPLOYEE NUMBER*** |   | REQUEST SALARY |  |
| POSITION APPLIED |   |   |
| ACCEPTED AS |   | LAST SALARY |
|  |  |   |
|  **1. PERSONAL DETAILS** |

|  |  |  |
| --- | --- | --- |
| FULL NAME AND (NICKNAME) |   |   |
| PLACE AND DATE OF BIRTH |   |
| FULL ADDRESS |   |
| NATIONALITY |   |
| MARITAL STATUS |   | NUMBER OF CHILDREN |   |
| RELIGION |   |
| MOBILE NUMBER (WITH CODES) |   |
| HOME PHONE NUMBER + CODE |   |
| PERSONAL EMAIL ADDRESS |   |
| NAME OF NEAREST AIRPORT |   |
| NEXT OF KIN NAME. RELATIONSHIP. FULL CONTACT NUMBERS |   |
| HEIGHT | WEIGHT | SHOE SIZE | COVERALL SIZE |
|   |   |   |   |

|  |
| --- |
| **2. TRAVEL DOCUMENT** |
| DOCUMENT | NUMBER | EXPIRY DATE | PLACE OF ISSUED |
| PASSPORT  |   |   |   |
| SEAMAN BOOK |   |   |   |
| VISA |   |   |   |
| VISA |   |   |   |

|  |
| --- |
| **3. HIGHEST FORMAL EDUCATION ATTENDED (SCHOOL / COLLEGE / UNIVERSITY)** |
| DEGREE | MAJOR | STARTED | GRADUATED | COUNTRY | GPA |
|   |   |   |   |   |   |
|   |   |   |   |   |   |

|  |
| --- |
| **4. DP LICENSE CERTIFICATE \*\* ATTACH COPIES** |
| DP CERTIFICATE | NUMBER | DATE ISSUED | EXPIRES | PLACE OF ISSUED |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |

|  |
| --- |
| **5. CERTIFICATE OF COMPETENCY** & **ENDORSEMENT \*\* ATTACH COPIES** |
| CERTIFICATE | NUMBER | ISSUE DATE | EXPIRY DATE  | PLACE OF ISSUE |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |

|  |
| --- |
| **6. CERTIFICATE OF PROFICIENCY \*\* ATTACH COPIES** |
| CERTIFICATE | NUMBER | ISSUE DATE | EXPIRY DATE  | PLACE OF ISSUE |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |

|  |
| --- |
| **7. LANGUAGES KNOWN** |
| LANGUAGES | SPOKEN | WRITTEN | UNDERSTOOD | MOTHER TONGUE |
|   |   |   |   |   |
|   |   |   |   |
|   |   |   |   |

|  |
| --- |
| **8. MEDICAL HISTORY** |
| **QUESTIONS** | **YES** | **NO** |
| HAVE YOU EVER SIGNED OFF FROM A SHIP DUE TO MEDICAL REASON? |   |   |
| HAVE YOU EVER UNDERGONE ANY MEDICAL OPERATION(S) IN THE PAST? |   |   |
| HAVE YOU CONSULTED A DOCTOR DURING PAST 12 MONTHS FOR AN ILLNESS / ACCIDENT? |   |   |
| DO YOU HAVE ANY HEALTH OR DISABILITY PROBLEM NOW? |   |   |
| IF YES TO ANY OF ABOVE THEN PLEASE FULL DETAILS BELOW OR ON SEPARATE SHEET OF PAPER |
|   |

|  |
| --- |
| **9. REFERENCES** |
| **COMPANY NAME** |   |
| NAME OF PERSON TO BE CONTACTED |   |
| ADDRESS |   |
| TEL NUMBER |   |
| WEB AND E-MAIL |   |
| **COMPANY NAME** |   |
| NAME OF PERSON TO BE CONTACTED |   |
| ADDRESS |   |
| TEL NUMBER |   |
| WEB AND E-MAIL |   |

|  |
| --- |
| **10. GENERAL INFORMATION** |
| **QUESTIONS** | **YES** | **NO** |
| 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? |   |   |
| IF YES TO ANY OF ABOVE THEN PLEASE FULL DETAILS BELOW OR ON SEPARATE SHEET OF PAPER |
|   |

|  |
| --- |
| **11. DECLARATION** |
| **I HEREBY DECLARE THAT ALL STATEMENTS AND PARTICULARS WRITTEN IN THIS DOCUMENT ARE TRUE AND SUPPLIED TO THE BEST OF MY KNOWLEDGE. IN ADDITION I AUTHORISE YOU TO CONTACT THE REFEREES LISTED ABOVE.** |
|  |
|  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **SIGNATURE** |   | **DATE** |   |
|  |
|  |

|  |
| --- |
| **12. RECORD OF SEA SERVICE** |
| VESSEL NAME | COMPANY | TYPE OF VESSEL | TYPE OF ENGINES | GRT | BHP | RANK | SIGN ON | SIGN OFF |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |

|  |
| --- |
| **13. TOTAL SEA TIME IN VARIOUS OPERATIONS** |
| RANK | VESSEL TYPE | DP | NON DP | ENGINE TYPE | YEAR | MONTH | DAY | HOURS | OPERATION |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |
|  |