

## APPLICANT'S PERSONAL DATA

POSITION OR RANK:	DATE OF READINESS:	WAGES:
FAMILY NAME :	CITIZENSHIP:	
FIRST NAME :	ADDRESS (full mail style): index	
FATHER'S NAME :		
DATE OF BIRTH :		
PLACE OF BIRTH :	NEAREST AIRPORT:	
E-MAIL:	HOME PHONE:	
	MOBILE PH.:	
MARITAL STATUS :	NEXT OF KIN INFORMATION:	
WIFE'S FAMILY NAME :	RELATION:	
WIFE'S FIRST NAME :	FAMILY NAME :	
WIFE'S FATHER'S NAME:	FIRST NAME:	
DATE OF BIRTH :	FATHER'S NAME:	
ADDRESS (full style): index		ADDRESS (full style): index
CONTACT PHONE :	CONTACT PHONE:	
Family/First//Middle Name of FATHER		Family (maiden name)/First//Middle Name of MOTHER
CHILDREN'S LAST/FIRST NAME (UNDER 18) :		CHILDREN'S DATE OF BIRTH :
		Number of kids

CLOTHES	SIZE	CLOTHES	SIZE		HEIGHT (Cms)	
OVERALL (digit size)		SWEATER (digit size)			WEIGHT (Kgs)	
SAFETY SHOES		SHIRT (size around neck)			COLOR OF EYES	
TROUSERS					COLOR OF HAIR	

MARINE EDUCATION RECEIVED	FROM	TILL	TYPE OF DEGREE RECEIVED

PASSPORT / SBK	ISSUED BY	NO.	ISSUE DATE	VALID TILL
SEAFARER'S INDENTITY DOCUMENT				
SEAMAN'S BOOK				
TRAVELLING PASSPORT				
NATIONAL LICENCE:	GRADE	NO.	ISSUE DATE	VALID TILL
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
BASIC SAFETY LOGBOOK SECURITY				
BOSIET and HUET plus CA-EBS				
OLF accepted upgrade to the Norwegian Continental Shelf				

CERTIFICATE	STCW CODE	NO	ISSUED	VALID TILL

<b>BASIC SAFETY TRAINING STCW '95</b>	<b>A-VI/1-4</b>			
<b>PROFICIENCY IN SURVIVAL CRAFT, RESCUE B.</b>	<b>A-VI/2-1</b>			
<b>PROFICIENCY IN FAST RESCUE BOATS</b>				
<b>SECURITY DUTIES / AWARENESS</b>	<b>A-VI/6-2</b>			
<b>OIL&amp;GAS UK Medical Certificate</b>				
<b>GWO Working at heights</b>				
<b>GWO First Aid</b>				
<b>GWO Fire Awareness</b>				
<b>GWO Manual Handling</b>				
<b>Confined Spaces Awareness</b>				
<b>GWO Sea Survival</b>				
<b>Chester Step Test certificate</b>				
<b>VCA Certificate</b>				
<b>Banksman &amp; Slinger Certificate</b>				
<b>Rigging Lifting Training</b>				
<b>Crane Operator Certificate</b>				
<b>Boat Transfer Training</b>				
<b>Lifting and Rigging Supervisor Training</b>				
<b>LOLER ( Lifting Operations and Lifting Equipment Regulations )</b>				
<b>HLO ( Helicopter Landing Officer Nogepe 1.1 A Training</b>				
<b>OERTM (Offshore Emergency Response Team Member)</b>				
<b>OERTL ( Offshore Emergency Response Team leader)</b>				
<b>HDA (Helicopter Deck Assistant Nogepe 1.3 A )</b>				
<b>HDA (Helicopter Deck Assistant Nogepe 1.3 B )</b>				
<b>Coxwain Man Overboard Boat</b>				
<b>Dangerous Goods Training</b>				
<b>MIST (Minimum Industry Safety Training)</b>				
<b>H2S (Awareness training course)</b>				
<b>OSR (Offshore Safety Representative)</b>				
<b>HR (Helicopter Refueling Training)</b>				

<b>HEALTH CERTIFICATE</b>	<b>Issued by</b>		<b>Date of issue</b>		<b>Valid till</b>	
<b>YELLOW FEVER</b>	<b>Issued by</b>		<b>Date of issue</b>		<b>Valid till</b>	

<b>OTHER DOCUMENTS</b>	<b>ISSUED BY</b>	<b>NO</b>	<b>ISSUED</b>	<b>VALID</b>

<b>ENGLISH KNOWLEDGE (tick)</b>	<b>EXCELLENT</b> <input type="checkbox"/>	<b>GOOD</b> <input type="checkbox"/>	<b>MODERATE</b> <input type="checkbox"/>	<b>SATISFACTORY</b> <input type="checkbox"/>	<b>POOR</b> <input type="checkbox"/>
<b>Name of English test</b>		<b>Date</b>		<b>Result (% or rate)</b>	

<b>VISAS (IF VALID) OR ID RESIDENTS CARD EU</b>	<b>No</b>	<b>PLACE OF ISSUE (city/country)</b>	<b>ISSUE DATE</b>	<b>VALID TILL</b>

**WORK EXPERIENCE LAST 10 YEARS**


**LAST CREWING AGENCIES / OWNERS CONTACT DETAILS**

<b>COMPANY NAME</b>	<b>TEL/FAX/E-MAIL</b>	<b>CONTACT PERSON</b>

**DATE:** \_\_\_\_\_

**SIGNATURE OF EMPLOYEE:** \_\_\_\_\_

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**FOR OFFICE USE ONLY:**