



Chennai:

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RPSL NUMBER:RPSL/CHN/012 VALID UNTIL 14.10.2014

Application Form

App No:

Rank Applied For :		Availability Date :	
First Name	Middle Name	Last Name	
Date of Birth :	Place of Birth :	Nationality	
Present Rank	Vessel (Present):	Vessel (Preferred)	
Marital Status	Zone	Experience	

Permanent Address :				Present Address :			
City		State		City		State	
Pincode				Pincode			
Phone :				Phone :			
Mobile:				Mobile :			
Email :				Email:			

Documents	Grade	Number	Date of Issue	Place of Issue	Expiry Date
Certificate of Competency					
Passport					
CDC (National)					
US Visa C1/D					
Yellow Fever					

Full Name of Next of Kin:	Nothing	Relationship:	Nothing
Address of Next of Kin:			
Phone :			

Height in cms:	167		Weight in Kgs:		BMI	0.0
Boiler Suit Size :		Shoe Size :		INDOS NUMBER		

Family Data	Name	Date of Birth	Place of Birth	Passport No.	Place of Issue	Date of Issue	Date of Expiry
Wife							
Child M/F							
Child M/F							
Child M/F							
Child M/F							

Details of Courses & Certificates	Number	Date of Issue	Date of Expiry	Issued By
Advanced Fire Fighting / AFF Proficiency in Survival Craft & Rescue Boat / PSCRB				
Medical First Aid/Medicare				
Personal Safety & Social Responsibility (PSSR)				
Radar Observer / ARPA				
Radar Simulator / RANSCO				
GMDSS				
Hazmat Course				
Bridge Team Management				
Ship Handling Simulator				
Engine Room Simulator				
GMDSS ENDORSEMENT				
DCE PETROLEUM(Mgmt / Oper)				
DCE CHEMICAL(Mgmt / Oper)				
DCE GAS (Mgmt / Oper)				
TASCO				
CHEMCO				
LCHS				

NAME OF INSTITUTE	From	To	PERCENT	Type of Degree
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SCHOOL					
COLLEGE					
PRESEA					

Shore Employment

From	To	Rank / Nature Of Work	Employer Details

Last Two Employers' Name , PIC, and Contact No.

1			
2			

Computer Based PMS Experienced	
New Construction Experience	
Dry Docking Experience	

Medical History (Please give details if you have suffered from disease/Previously operated)

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1. Have you ever been denied a foreign Visa Yes No

If Yes, state which country and reason (if known)

2. Have you been the subject of a court of enquiry or involved in a Maritime Accident Yes No

If Yes please attach details

Declaration

I hereby affirm that all information provided by me in this application is true, factual and to the best of my knowledge and belief and I have not withheld any information I fully abide by company's rules and terms of employment

Date : _____

Signature: _____