

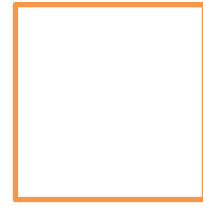


RPSL-CHN-162273

(Approved By D.G. Shipping, Govt. of India)

Valid upto: 27/09/2029

Rank Applied For:	
-------------------	--



PERSONAL DESCRIPTION AND INFORMATION: -

First Name:	Middle Name:	Surname:
Nationality:	Date / Place of Birth:	Indos No. :
Nearest Airport :	Last drawn wages:	Expected Wages:

Permanent Address:		Present Address:	
PIN Code:		PIN Code:	
STD Code:	Phone Number:	STD Code:	Phone Number:
Email:		Mobile No:	

Passport No.		Place of Issue		Date of Issue		Date of Expiry	
U.S. Visa Type		Place of Issue		Date of Issue		Date of Expiry	
Other		Place of Issue		Date of Issue		Date of Expiry	

Seaman's Book (CDC)	Number	Date of Issue	Place of Issue	Expiry Date
Indian				
Panamanian				
Others				

DETAILS OF WATCH KEEPING: -

	Cert. No.	Date of Issue	Issued By	Date of Expiry	Place of Issue
Indian					
Panama					
COP					
6G/4G/3G/ 2G					
COC (For Cook)					

CERTIFICATE OF COMPETENCY DETAILS: -

License	Grade	Number	Date of Issue	Place of Issue	Date of Expiry
Indian					
U.K.					
Panamanian					
Others					
GMDSS (Deck Officers)					
GMDSS Endorsement					

YELLOW FEVER DETAILS: -

Number	Date of Issue	Place of Issue	Expiry Date

Zax Marine Services PVT., LTD.,

Address : No.1,SF No.261/5A,Mysha Complex, ECR Road,
Kappivakkam, Cheyyur Tk, Chengalpattu Dt, Tamil nadu-603 304.

Mobile : + 91 9791835888
Email :crew@zax-marine.com

**RPSL-CHN-162273****(Approved By D.G. Shipping, Govt. of India)****Valid upto: 27/09/2029****NEXT OF KIN DETAILS:**

Full Name of Kin :		Relationship:	
Address of Next of Kin:			
		STD Code:	Phone Number:
		Mobile No.:	

Family Details	Name	D.O.B.	PPT. No.	D.O.I.	Place of Issue	D.O.E.	ECNR
Wife							
Child M/F							
Child M/F							

Height :	Cm:	BMI :	Weight:	Kg:
Boiler Suit Size (S , M , L , XL , XXL) :			Shoe Size (6, 7, 8, 9, 10, 11):	

COURSES AND CERTIFICATE (STCW -2010) & OTHER MODULAR COURSES.

Name and Description			Number	Date of Issue	Date of Expiry	Place of Issue
Elementary First Aid - EFA						
Personal Survival Techniques - PST						
Proficiency in Survival Craft - PSC						
Personal Safety & Social Responsibility - PSSR						
Fire Prevention & Fire Fighting – FP&FF						
BST – STCW 2010 (EFA, PST, PSSR, FP&FF)						
Proficiency in Survival Craft & Rescue Boat						
Security Training for Seafarers (ST-DSD)						
Ship Security Officer						
Refresher + Updating Course / Rating						
ECDIS						
ECDIS – TYPE						
ARPA						
ROC						
Medical First Aid – MFA						
Advanced Fire Fighting - AFF						
I.S.P.S.						
Bridge Team Management						
BRM						
Engine Room Simulator	Level					
	Level					
ERRM						
Ship Handling Simulator						
ISM						
OTFC / OTCT / TASCOT						
OTFC / OTCT - DCE						
ISM						
CHEMCO / CTFC						
CHEMCO / CTFC - DCE						

Zax Marine Services PVT., LTD.,

**Address : No.1,SF No.261/5A,Mysha Complex, ECR Road,
Kappivakkam, Cheyyur Tk, Chengalpattu Dt, Tamil nadu-603 304.**

**Mobile : + 91 9791835888
Email :crew@zax-marine.com**

GTFC / GASCO				
GTFC / GASCO - DCE				
PRE-SEA / DNS				
Maritime English				
Other				

PREVIOUS SEA EXPERIENCE OF LAST SEVEN YEARS							[Start with your last vessel served]			
VESSEL	TYPE	RANK	DWT	BHP	GRT	FROM	TO	TOTAL		Manning Agents / Owners
								Mnts	Dys	

Please give details of the following: -

Reason for leaving present company -

Please advise reason for short contract if any -

Any taking over of experience of vessel -

Working experience with mixed crew, Please advise nationality -

Any Medical illness history -

BANK DETAILS:			
Name of Bank		Full Bank Address	
Name of A/c Holder		Branch Code	
Account No.		Swift Code	

Pre Sea Training / Apprentice (Ship)			
Name of Institute / College	From	To	Type of Degree

Educational Background				
Qualification	School / College	From	To	Percentage / Grade

Technical Background				
Degree / Diploma	Institute / College	From	To	Percentage / Grade

Zax Marine Services PVT., LTD.,

Address : No.1,SF No.261/5A,Mysha Complex, ECR Road,
Kappivakkam, Cheyyur Tk, Chengalpattu Dt, Tamil nadu-603 304.

Mobile : + 91 9791835888
Email :crew@zax-marine.com

--	--	--	--	--

Medical History

(a) Have you ever signed off from a ship due to Medical reasons, (If Yes, give details)?		Yes /No
Name of Vessels	Date of Occurrence	
Brief Description of Illness / Injury/ Accident		

(b) Did you suffer or Are You Presently suffering from any Disease which keeps you unfit for sea service.	Yes/ No
(c) Are you addicted to alcohol or drugs of any kind.	Yes/No
(d) Have you suffered from following Malaria Diabetes Epilepsy Nervous Disability	
(e) Did you ever undergo psychiatric treatment: Yes/ No	

Reference: -

Sr. No.	Name of the company	PIC	Designation	Phone No
1				
2				

I hereby certify and confirm that the information's contained above is true and factual, relevant documents wherever applicable will be shown on request.

Applicant's Signature

Date

For Office use: -**Received by:**

Remarks:

Date

Zax Marine Services PVT., LTD.,

Address : No.1,SF No.261/5A,Mysha Complex, ECR Road,
Kappivakkam, Cheyyur Tk, Chengalpattu Dt, Tamil nadu-603 304.

Mobile : + 91 9791835888
Email :crew@zax-marine.com