



EMPLOYMENT APPLICATION FORM

INSERT
PHOTO

REFERRED BY	POSITION APPLIED FOR	VESSEL TYPE:
FIRST NAME	MIDDLE NAME	SURNAME

PERSONAL PARTICULARS

ADDRESS			LANDLINE / MOBILE NO.		
DATE OF BIRTH	PLACE OF BIRTH	NATIONALITY	AGE	HEIGHT	WEIGHT
CIVIL STATUS		TIN NO.:	RELIGION:		
S.S.S. No.		PHILHEALTH No.:	PAG-IBIG / HDMF No.:		
NEXT-OF-KIN:		RELATIONSHIP:	LANDLINE / MOBILE NO.		
ADDRESS :					

EDUCATIONAL ATTAINMENT

LEVEL FINISHED	YEARS INCLUSIVE	NAME OF SCHOOL	AWARDS RECEIVED, IF ANY
SECONDARY			
COLLEGE DEGREE:			

NATIONAL CERTIFICATES / LICENSE

ISSUING AUTHORITY	RANK	LICENSE NO.	DATE OF ISSUE	DATE OF EXPIRY
Philippine License (officers)				
STCW Endorsement (COC) – for officers				
STCW Endorsement (COE) – for officers				
STCW Certificate (COP) – for ratings				
STCW Endorsement (GOC) – for deck officers				
COOK ISLAND COE				
HONGKONG LICENSE				
MALAYSIAN SID				
MARSHALL ISLAND LICENSE				
PANAMA LICENSE / BOOKLET				
SINGAPORE COE				
VANUATU BOOKLET				

OTHER CERTIFICATES / DOCUMENTS

TYPE	CERTIFICATE NO.	DATE OF ISSUE	DATE OF EXPIRY
PASSPORT			
Philippine Seafarer's Identification & Record Book (SIRB)			
SEAFARER'S REGISTRATION CERTIFICATE (SRC)			
U.S. VISA "C1D" <input type="checkbox"/> "D" <input type="checkbox"/>			
INTERNATIONAL CERTIFICATE OF VACCINATION (YELLOW FEVER)			
CHOLERA VACCINATION			
TYPHOID VACCINATION			

STCW 2010 CERTIFICATES

COURSES	CERTIFICATE NO.	DATE OF ISSUE	DATE OF EXPIRY
Advanced Fire Fighting Course			
Advance Training for Oil and Chemical (ATOC)			
Basic Safety Training (BSC) / Basic Training (BT)			
Basic Training for Oil and Chemical (BTOC)			
Bridge Teamwork Management (BTM)/ Bridge Resource Management (BRM)			
Electronic Chart Display and Electronic System – ECDIS (as applicable)			



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Global Maritime Distress & Safety System (GMDSS)			
JRC / TRANSAS ECDIS			
Medical Care (MECA)			
Medical Emergency First Aid (MEFA)			
National Certificate (NC) 1 / 2			
Proficiency in Fast Rescue Boat (PFRB)			
Proficiency in Survival Craft & Rescue Boat (PSCRB)			
Ship Security Awareness Training & Seafarer with Designated Security Duties (SSAT & SDS)			
Ship Security Officer (SSO)			
Ship Simulator & Bridge Teamwork (SSBT)			
Specialized Training Chemical Tanker (STCT) Course / Advance Training in Chemical Tanker Cargo Operation (ATCT)			
Specialized Training for Oil Tanker (STOT) Course / Advance Training in Oil Tanker Cargo Operation (ATOT)			

SEA EXPERIENCE

VESSEL	TYPE	GRT	ENGINE MAKE/BHP	PRINCIPAL/MANNING AGENCY	RANK	SIGN ON	SIGN OFF	REASON

MEDICAL HISTORY

It is important that all illnesses (minor and major) should be stated. The Company is entitled to refuse any claim for treatment, cost or any other insured benefits if a complete statement of all previous illnesses has not been given.

(A) Please give details of any past health problems:

(B) Please give details of any medical benefits claimed:

<p>APPLICANT'S SIGNATURE :</p> <p>_____ DATE: _____</p> <p>With my signature, I hereby attest and certify that all information as stated above are true and correct, and that any false statement or undisclosed material and/or information in regards to my past or present employment will disqualify me from any employment, benefits and/or claims.</p>	<p>INTERVIEWER'S SIGNATURE :</p> <p>_____ DATE: _____</p> <p>Position: _____</p>
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