

RANK APPLIED FOR :-				INTERVIEW DATE	E:					
FULL NAME IN BLOCK LETTERS (AS IN PASSPORT)										
	(SURNAME	E)		(FIRST NAME) /	GIVEN NAME			COL	OUR	
PERMANENT ADDRESS -								PHOTO Preferat	GRAPH - oly 4 x 4 Vhite	
PIN CODE :									iish	
TELEPHONE NO.										
E-mail i.d (S).: MAILING / ALTERNATE ADDRESS -							_			
MAILING / ALTERNATE ADDRESS -										
							English	Average	Good	Excellent
							Read			
PIN CODE : TELEPHONE NO.				-	NEARES		Write Speak			
DATE OF BIRTH -		PLACE & STATE -	MAD	ITAL STATUS -		TIONALITY		IGION	MOT	HER TONGUE
	BIRTHY	LAGE & STATE -	MARRIED	SINGLE		HONALITT	KEL			HERTONGOE
DOCUMENTS		NUMBER/GRADE		DATE ISSUED	PLACE OF ISS	JE	VALID UP T	O / LIMITATI	ON	
PASSPORT **										
SEAMAN'S BOOK (CDC) **										
CERTIFICATE OF COMPETENCY / SERVICE / WATCH	KEEPING **									
INDIAN EQUIVALENT ENDORSEMENT(IF COC IS UK)	**									
POLICE VERIFICATION / CLEARANCE										
GMDSS (INDIAN/UK) **										
STCW ENDORSEMENT OF GMDSS **										
INDOS **										
ANY VALID VISA										
ONGC Pass										
							SIGNATUR	E OF APPLI	CANT	



SEAMEC LIMITED - Application / Personal Form

NO	DETAILS OF SHIPPING COURSES COMPLETED	INSTITUTE / PLACE OF ISSUE	ISSUE DATE	NUMBER	EXPIRY	REMARKS
1	Fire (Fighting - Basic/Advanced)/ (FPFF) **					
2	Proficiency in Survival Craft (PSC) & Rescue Boat (PSCRB) **					
3	Personal Survival Techniques (PST) **					
4	Personal Safety & Social Responsibility (PSSR) **					
5	Medicare/Medical First Aid/Elementary First Aid **					
6	Automatic Radar Plotting Aids (ARPA)					
7	Radar Observer Course					
9	Ship Security Officer (SSO - ISPS) **					
10	Revalidation / Refresher & Updating Training					
11	Yellow Fever Inoculation					
12	Dynamic Positioning Course (Basic / Advanced / Unlimited / Maintenance)					
13	DP Log Book					
14	Ship / Engine / Navigation Simulator					
15	Helicopter Underwater Escape Training					
16	HLO - Helicopter Landing					
17	Other					

SEA SERVICE / EXPERIENCE (Date-wise in descending order - Starting with Last vessel Served)

COMPANY	VESSEL NAME	RANK	GRT	внр	Vessel Type	Engine Type	FROM	то	NO OF DAYS / REASON
DP DIVING (DSV) VESSEL EXPERIENCE (KONGSBERG / ALSTORM) Yrs. ENGINE EXPERIENCE (MAN B & W / WARTSILA)								Yrs.	



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MANDATORY INTERVIEW INFORMATION

EDUCATIONAL & PROFESSIONAL QUALIFICATIONS **

EXAMINATION PASSED	SCHOOL/COLLEGE/UNIVERSITY	YEAR OF COMPLETION / DURATION	PERCENTA	GE OF MARKS OBTAINED / CLASS
S.S.C.				
H.S.C.				
ENGINEERING DEGREE				
PRESEA TRAINING				
OTHER QUALIFICATION				

1) Reasons for seeking employment with Seamec Limited. :

2) Have you ever been involved in an accident / Incident / Near miss : (I.e. Collision / Grounding / Fire / Abandonment / Marpol violation)

Please give a brief explanation :

3) Have you ever been deported from any country or have any past criminal / Black-list record :

4) Have you ever off-signed on medical grounds or any past medical history : (Please provide Police clearance / verification)

5) Reasons for leaving previous company or any objections to references from previous employer :

6) I confirm that I will read and understand the Company's procedures and awareness prior joining :

APPLICANTS SIGNATURE



		FOR OFFICE ONLY						
ASSESSMENT								
1) General appearance / demeanor :								
) Personality & Communication skills :								
) Attitude and knowledge towards profession, responsibilities and duties :								
4) Reference Checked : Company(s) : Name of Person(s) :								
5) Officer Deemed for Employment in rank :		Date :						
6) Technical Evaluation and Remarks :								
	BASE MANGER	Fleet Personnel Manager						



INFORMATION TO BE FILLED AT THE TIME OF JOINING

BANK DETAILS **	NAME AS PER BANK A/	C **				PAN NO **	PAN NO **				
NRE BANK NAME **				BANK A/C N	O INR**						
BRANCH NAME **				BRANCH CO	DDE **						
BANK A/C NO **	C NO ** BRANCH NAME **										
SWIFT CODE **	WIFT CODE ** NEFT / RTGS IFSC : **				S IFSC : **						
COUNTRY **				COPY OF CH	EQUE ATTACHED **						
						-					
			Full Name	Tel No	DATE OF BIRTH		000	CUPATION			
DETAILS OF FAMILY MEMBERS		FATHER									
		MOTHER									

		MOTHER		
		SPOUSE		
((UNMARRIED SISTERS / DEPENDENTS / OTHERS)			

	NEXT OF KIN(s) **	CONTACT PERSON IN CASE EMERGEN	CY **	OFFICE ADDRESS / CONTACT
FULL NAME **				
RELATIONSHIP **				
ADDRESS **				
TELEPHONE NO. **				
	particulars is true and that I shall report with all valid documents in original. nses towards my reporting, repatriation or revalidation of my documents			

3) I confirm that any false or incorrect information may result in disciplinary action being taken against me.

APPLICANTS SIGNATURE

Checked By :

Sr. Officer/Jr. Officer

FLEET PERSONNEL / CREW MANGER