****

Scanned

**APPLICATION FORM FOR EMPLOYMENT**

● **Personal Data**

|  |
| --- |
| **Surname** |
| **Name Sex** |
| **Permanent address** |
| **Phone / Mobile phone** |
| **Email** |
| **Nacionality** |
| **Marital status** |
| **Rank** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Document | **Number** | **Issued** | **Place** | **Valid until** |
| **Passport** |  |  |  |  |
| **Seaman’s book** |  |  |  |  |
| **Panamanian Seamen book** |  |  |  |  |
| **Liberian Seamen book** |  |  |  |  |
| **Other Seamen book** |  |  |  |  |
| **Medical Certificate** |  |  |  |  |
| **Yellow fever** |  |  |  |  |
| **US Visa C1/D** |  |  |  |  |

● ***Certificates/Courses***

***Highest Competency certificate held*:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Issuing authority | Grade / Level | **Certificate No.** | **Date of issue** | **Validity** |
| **National Certificate of Competency** |  |  |  |  |
| **Panamanian** |  |  |  |  |
| **Liberian** |  |  |  |  |
| **Other** |  |  |  |  |

●**COMPULSORY CERTIFICATE FOR ALL SEAMEN**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Courses/Certificate** | **Certificate No.** | | Date/Place issued | | **Valid until** |
| **Personal survival techniques (A- VI/1)** |  |  | | |  |
| **Elementary first aid (A- VI-1)** |  |  | | |  |
| **Fire Prevention & Fire Fighting (A- VI-1)** |  |  | | |  |
| **Personal Safety and Social Responsibility (A- VI-1)** |  |  | | |  |
| **Tanker Familiarization (V/1)** |  |  | | |  |
| **Specialized Training Programme on Oil Tankers** |  |  | | |  |
| **Specialized Training Programme on Chemical Tks** |  |  | | |  |
| **Specialized Training Programme on Liquified Gas Tks** |  |  | | |  |
| **Maritime English** |  |  | | |  |
| **COMPULSORY FOR DECK /ENGINE OFFICERS:** |  |  | |  | |
| **Advanced Fire Fighting (VI/3)** |  |  | | |  |
| **Medical First Aid (VI/4-1)** |  |  | | |  |
| **Medical Care (VI/4-2)** |  |  | | |  |
| **Proficiency in Survival Craft & Rescue Boat Operations (VI/2)** |  |  | | |  |
| **Ship Security Officer (STCW VI/5) Master & Chief Officer** |  |  | | |  |
| **COW - IGS( Tankers)** |  |  | | |  |
| **COMPULSORY FOR DECK OFFICERS** |  |  | |  | |
| **Radar Observer & Radar Simulator (B-1/12)** |  |  | | |  |
| **ARPA (B-1/12)** |  |  | | |  |
| **GMDSS (IV/2)** |  |  | | |  |
| **Operational Use of ECDIS** |  |  | | |  |
| **Bridge Team Management** |  |  | | |  |
|  |  |  | | |  |
| **COMPULSORY FOR ENGINE OFFICERS** |  |  | | |  |
| **ERM ( for Tankers only)** |  |  | | |  |

● ***Sea Experience: (Last 5 years) (Most recent experience on top line)***

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Company** | **Vessel** | **Flag** | **Type** | **DWT** | **HP** | **Main Engine** | | **Rank** | **Date from: dd/mm/yy** | **Date to: dd/mm/yy** |
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● ***Notes to sea experience:***

●***Deck officers & Pumpman:***

1. ***Indicate type of cargoes loaded:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***
2. ***Where you loading different cargoes simultaneously? yes /no***
3. ***Which kind of pumps you have been experienced with\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

●***Engineers:***

1. ***Please state if u have been sailing with UMS and which remote control systems are familiar to you:***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Medical Certificate** | **Number** | **Issued** | **Place** | **Valid until** |
|  |  |  |  |  |
|  | **Color of eyes** | **Color of hear** | **Height** | **Weight** |
|  |  |  |  |  |

● ***General***

1. **Have you ever been denied a foreign visa?**

**If yes, state which country and reason.**

1. **Have you been the subject of a court of inquiry or involved in a marine accident?**
2. **You suffer from any serious illness? Which one?**
3. **Have you ever been a user of/or addicted to a dangerous drugs, including marijuana?**
4. **Last salary:**
5. **Salary expected:**

|  |  |
| --- | --- |
| **(C) Nearest airport** |  |

● **Knowledge of language**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Spoken** | **Written** | **Understand** |
| **English** |  |  |  |
| **Spanish** |  |  |  |
| **French** |  |  |  |
| **German** |  |  |  |
| **Italian** |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date** |  | **Name & Surname** |  | **Signature** |  |
| (Print Name & Surname) |

**Please reply to:**

**South Pacific Seafarers Chile**

**Esmeralda 940, 3rd Floor, Office 31**

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