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| **MARINE HIVE LTD**  (License Num: MLA098, ISO: 9001:2015 & MLC 2006 Certified) | | Revision No: | | 001 |
| Page: | | Page 1 of 4 |
| Form No: | | MHL-F-10 |
| **Address** | Asset Casa Serena, Flat-A2(Second Floor), House-25, Garib-E-Newaz Avenue, Sector-11, Uttara Model Town, Dhaka-1230; Phone: (+88) 02 58953384 | | | |
| **Email** | **crewing@marinehive.com** | **Website** | **www.marinehive.com** | |

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Photo

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| **Application for Employment** |

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| **1** |  | **Position REGISTRATION NO** | |
|  | | | |
|  |  | **Position applied for:** |  |
|  |  | **Are you willing to accept any other positions?** |  |
|  |  | **If YES, which positions would you consider?** |  |
|  |  | **Readiness From** |  |

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| **2**  **2** |  | | **Personal details** | | | | | | | | | |
|  |  | |  | | | | | | | | | |
| **Full Name:** | |  | | | | | | **Sur Name:** |  |
| **Date & Place of Birth:** | | |  | | | | **Nationality:** BANGLADESHI | **Marital Status:** SINGLE | |
| **Height(cm):** | | | | **Weight(kg):** | | | **Safety Shoe:** | **Boiler Suit:** | |
| **Mailing Address:** | | | | | | | | | **Post Code:** |
| **:** +88 | | | | | **:** +88 | **Email:** | | | 146px-Skype_logo**:** |

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| **3** |  | **Education Background** | | | | |
|  |  |  | **Name of Institute** | **From Year** | **To Year** | **Highest Qualification Attained** |
|  |  | **School** |  |  |  |  |
|  |  | **College** |  |  |  |  |
|  |  | **Pre Sea Training** |  |  |  |  |
|  |  | **Other Qualifications** |  |  |  |  |

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| **4** |  | **Identity documents** | | | | | | | |
|  | | | | | | | | | |
|  |  | **DOCUMENT** | **COUNTRY** | | **NUMBER** | **ISSUE DATE** | | **PLACE OF ISSUE** | **EXPIRY DATE** |
|  |  | **Passport:** |  | |  |  | |  |  |
|  |  | **Seaman’s book:** | **Bangladesh** | |  |  | |  |  |
|  |  | **Visa – US ‘C1/D’** | **YES / NO** | |  | |  |  |  |
|  |  | **Holding Australian MCV** | | **YES / NO** |  | |  |  |  |

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| **5** |  | **Family details** | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | | | | | | | | |  | | | |  | | | | |
|  |  | **Next Of Kin/Nominee** | | | | | **Full Name:** | |  | | | **Sur Name:** | | |  | | | | | **Relationship:** |  | |
|  |  | **Address:** | | | |  | | | | | | | | | | | | | | | | |
|  |  | **🖁 Hand Phone No.** | | | | | |  | | | | | **🕿Telephone No.** | | | |  | | | | | |
|  |  | Relation | | **Name** | | | | | | **P.O.B** | **D.O.B.** | | **PPT NO.** | | | **D.O.I.** | | | **P.O.I.** | | | **D.O.E.** |
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| **6** |  | **National Certificate of Competency (Highest certificate of *competency held)*** | | | | | | | |
|  | | |  | | |  | |
|  |  | **Class/Grade** | | **Issuing Country** | **Certificate No.** | | **Date Issued** | **Place Issued** | **Valid Until** |
|  |  | **CLASS-** | |  |  | |  |  |  |
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| **6a** |  | **National Dangerous Cargo Endorsements** | | | | | |
|  |  |  | | | | | |
|  |  |  | **Endorsement Type** | **Certificate No.** | **Date Issued** | **Place Issued** | **Valid Until** |
|  |  | **Petroleum** |  |  |  |  |  |
|  |  | **Liquefied Gas** |  |  |  |  |  |
|  |  | **Chemicals** |  |  |  |  |  |

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| **7** |  | **Flag State Equivalent Certificates Of Competency issued by other countries *(Issued by countries other than in Section 6)*** | | | | | | | | |
|  | | | |  | | |  | | |
|  |  | **Class** | **Issuing Country** | | **Certificate No.** | **Date Issued** | | **Place Issued** | **Valid Until** | | |
|  |  |  | **Liberia** | |  |  | |  |  | | |
|  |  |  | **Panama** | |  |  | |  |  | | |
|  |  |  | **Bahamas** | |  |  | |  |  | | |

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| **7a** |  | **Flag State Equivalent Dangerous Cargo Endorsements *(Issued by countries other than in Section 6a)*** | | | | | |
|  |  |  | | | | | |
|  |  | **Country** | **Endorse Type/ Level** | **Certificate No.** | **Date Issued** | **Place Issued** | **Valid Until** |
|  |  | **Liberia** |  |  |  |  |  |
|  |  | **Marshall Islands** | Management |  |  |  |  |
|  |  | **Panama** | Adv. Oil & Chemical |  |  |  |  |
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| **8** |  | **Certificates ( STCW and Value added)** | | | | | |
|  |  |  |  |  |  |  |  |
|  |  | **Course** | **Institution** | **Place** | **Cert. No.** | **Issue Date**  **(DD/MM/YY)** | **Expiry Date**  **(DD/MM/YY)** |
|  |  | Personal Survival Techniques |  |  |  |  |  |
|  |  | Basic / Advance Fire Fighting |  |  |  |  |  |
|  |  | Fire Prevention And Fire Fighting |  |  |  |  |  |
|  |  | Elementary First AID |  |  |  |  |  |
|  |  | Basic Training For Oil and Chemical Tanker Cargo Operation |  |  |  |  |  |
|  |  | Medical First Aid |  |  |  |  |  |
|  |  | Capt’s Medical Guide/ Medical Care |  |  |  |  |  |
|  |  | Proficiency in Survival Craft and rescue Boats other than First Rescue Boat-PSCRB |  |  |  |  |  |
|  |  | Personal Safety and Social responsibility |  |  |  |  |  |
|  |  | Ship Security Officer |  |  |  |  |  |
|  |  | Tanker Familiarization (Oil,Chem,Gas) |  |  |  |  |  |
|  |  | Adv. Oil Tanker Course |  |  |  |  |  |
|  |  | Adv. Chemical Tanker Course |  |  |  |  |  |
|  |  | Bridge & Eng. Room Resource Mgmt |  |  |  |  |  |
|  |  | Shipboard Safety Officer |  |  |  |  |  |
|  |  | Marine Environment Protection |  |  |  |  |  |
|  |  | ISPS Code Familiarization |  |  |  |  |  |
|  |  | Automatic Radar Plotting Aid (ARPA) |  |  |  |  |  |
|  |  | Electronic Navigation System |  |  |  |  |  |
|  |  | Security Awareness Training (SAT) |  |  |  |  |  |
|  |  | Security Training for Seafarer with designated Security Duties |  |  |  |  |  |
|  |  | High Voltage Installation |  |  |  |  |  |
|  |  | Elect. Chart Display & Info System |  |  |  |  |  |
|  |  | ***OTHER RELEVANT COURSES*** |  |  |  |  |  |
|  |  | Rating as Able Seafarer Engine (III/5) |  |  |  |  |  |
|  |  | Rating as Able Seafarer Deck (II/5) |  |  |  |  |  |
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| **9**  **9** |  | **Record of previous service** |
|  |  | **(Please give a full record starting with the last vessel on which you served)** |

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| **VESSEL NAME** | **COMPANY** | **VESSEL TYPE** | **FLAG** | **DWT**  **(MT)** | **GRT**  **(MT)** | **MAIN ENGINE** | | | **BHP /**  **(KW)** | **RANK** | **SIGN ON** | **SIGN OFF** | **SEATIME** | **Reason For Termination** |
| **Maker** | **Type** | |
|  | |  |  |  | **DD/MM/YYYY** | **DD/MM/YYYY** | **MM-DD** |  |
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| **10** |  | **For Engineers (Please provide Makers, Model & Capacity details)** | |
|  |  |  | |
|  |  | **Boilers** |  |
|  |
|  |  | **Generators** |  |
|  |
|  |  | **Cranes / Grabs** |  |
|  |
|  |  | **Purifiers** |  |
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| **11** |  | **Sailing Experience: (Please advise PRESENT RANK EXPERIENCE on each type of vessel)** | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | |
|  |  | **CONT/RFG (MM-DD)** | **G. CARGO (MM-DD)** | **BC/OBO/RR (MM-DD)** | | **PCC/PCTC (MM-DD)** | **OIL/VLCC (MM-DD)** | **CHEMICAL (MM-DD)** | | **PRODUCT (MM-DD)** | **LPG/LNG (MM-DD)** | | **OTHERS (MM-DD)** | **TOTAL RANK EXPERIENCE** |
|  |  |
|  |  |  |  |  | |  |  |  | |  |  | |  |  |
|  |  |
|  |  | **LAST SALARY DRAWN** | | |  | | | | **EXPECTED SALARY** | | |  | | |

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| **12** |  | **References *(Please give the name and address of your current or immediate past employer)*** | | |
|  |  |  | | |
|  |  | **Company Name** |  |  |
|  |  | **Address** |  |  |
|  |  | **Contact Person / Designation** |  |  |
|  |  | **Contact Number/ E-Mail** |  |  |

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| **13** |  | **Miscellaneous ( *Please give the details of your FC account )*** | | | | | | |
|  |  |  |  | | |  | | |
|  |  | **Bank Name** |  | | **Branch :** | |  | |
|  |  | **Account Name** |  | | | | | |
|  |  | **Bank Address** |  | | | | | |
|  |  | **Account No.** |  | **Swift / BIC Code** | | | |  |

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| **14** |  | **Medical history** | | |
|  |  |  | | |
|  |  | **Have you ever signed off a ship due to medical reasons?** | **Yes/No** |  |
|  |  | **Have you undergone any operation in the past?** | **Yes/No** |  |
|  |  | **Have you consulted a doctor during the last 12 months for an illness/accident?** | **Yes/No** |  |
|  |  | **Do you have any health or disability problems now?** | **Yes/No** |  |

**(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)**

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| **15** |  | **Declaration** |
|  |  |  |
|  |  | **I hereby declare that the above particulars are true and authorize you to contact the referees listed above.** |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **Name/Signature** | **Date** |