



Oceanus Marine Services

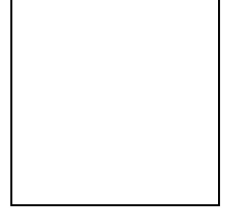
Address : Office No. 05 Fourth Floor, Paranjpe Udyog Bhawan,
Railway Station West, Above Khandelwal Sweets, Near Thane
Maharashtra 400601

APPLICATION FORM

Document No. SSN/RPSL/APPL/_____

POSITION / RANK APPLIED FOR : _____

AVAILABILITY DATE : _____



1.1 PERSONAL DETAILS:

Name as in passport	(Surname)	(First name)	(Middle name)
Date & Place of birth	Date of Birth :	Place of Birth :	Nationality : INDIAN
Home address			Tel No. :
			Present Age :
			Mobile No. :
Mumbai address if any			Email ID :
			Marital Status :
			Number of Children : ---

1.2 EDUCATION BACKGORUND:

Qualification	School/College	Form	To	Percentage / Grade

1.3 TECHNICAL BACKGROUND:

Degree/Diploma	Institute/College	From	To	Percentage / Grade
Pre sea Training for GP Rating Course				

1.4 IDENTITY DOCUMENT:

Document	Country	Number	Issue date	Expiry date	Place of issue
Passport	Indian				
Seaman book	Indian				
	Other				
	Other				
Do you hold a US Visa "C1/D"?	Yes/ No	No	Issue date : N.A.	Expiry date : N.A.	
Do you hold Schengen Visa	Yes/ No	No	Issue date : N.A.	Expiry date : N.A.	
Indos. No. (for Indians only) :			Yellow fever :	Expiry date :	
Union membership (MUI / NUSI) :	No			Expiry date : N.A.	

1.5 FAMILY DETAILS (details of wife, children and parents) (if unmarried kindly give details of Father and Mother only) (additional sheet may be attached if required)

Name	Relation	D.O.B	PPT No. / PAN / Aadhaar	Place of issue	Issue date	Expiry date	ECNR

1.6 NEXT OF KIN DETAILS: (includes person to be contacted in case of emergency also)

Full name of kin :		Relationship :
Address of next of kin:		Tel No. :
		Mobile No. :
		Email ID:

1.7 CERTIFICATES (HIGHEST CERTIFICATE OF COMPETENCY HELD):

Grade/Class of COC	Issuing country	Date of passing exam	Certificate No:	Issue date	Place of issue	Expiry date

1.8 DETAILS OF COURSES & CERTIFICATES FOR RATINGS :

Courses	Certificate No.	Issued by	Issued date	Expiry date
1. Elementary First Aid (EFA)				
2. Personal Survival Technique (PST)				
3. Personal Survival & Social Responsibility (PSSR)				
4. Fire Prevention & Fire Fighting (FPFF)				
5. Certificate of Proficiency in Security Training for Seafarers with Designated Security Duties (STSDSD)				
6. Oil Tanker Familiarization (OTFC)				
7. Chemical Tanker Familiarization (CTFC)				
8. Gas Tanker Familiarization (GTFC)				
9. ISPS Course				
10. ISM Course				
11. DCE Oil-Support				
12. DCE Chemical – Support				
13. DCE Gas – Support				
14. AB / MM Course				
15. Watch Keeping Certificate Ratings (Deck / Engine)				
16. Pump Man Course				
17. Cookery Course				
18. MMD Cookery Certificate				
19. Fitter Course / Class Certificate				
20. General Purpose Rating				
21. Carry our Fire-Fighting Operations in Basic Training for Oil, Chemical & Liquefied Gas Tanker Cargo Operations				
22. Basic Training for Oil Tanker Cargo Operations				

1.9 DETAILS OF COURSES & CERTIFICATES FOR OFFICERS:

Courses	Certificate No.	Issued by	Issued date	Expiry date
1. Proficiency in Survival Craft & Rescue Boat (PSCRB)				
2. Medical First Aid (MFA) / Medicare				
3. Advanced Fire Fighting (AFF)				
4. Oil Tanker Familiarization (OTFC) / TASC0				
5. Chemical Tanker Familiarization (CTFC) / CHEMCO				
6. Gas Tanker Familiarization (GTFC) GSCO				
7. DCE Oil-Support / Operation / Management				
8. DCE Chemical Support / Operation / Management				
9. DCE Gas Support / Operation / Management				
10. Ship Security Officers Course (SSO)				
11. ECDIS				
12. BTM (Renewed every 5 years)				
13. Automatic Radar Plotting Aid (ARPA)				
14. Radar Observer / RANSCO Simulator				
15. GMDSS				
16. GMDSS Endorsement				
17. Revalidation Course for Deck / Engine Officer				
18. Refresher & Up gradation course for Deck /Engine Officer				
19. Ship Safety Officer Course / Risk Assessment				
20. Ship Maneuvering Simulator				
21. Any Other (Please Specify)				

1.10 TOTAL SAILING EXPERIENCE :

Crude tankers	Product tanker	Chemical tankers	Oil / Chemical	CARGO	Others
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1.11 MEDICAL HISTORY (IF THE ANSWER IS YES TO ANY OF THE BELOW, PLEASE GIVE FULL DETAILS AND ATTACH A SPARATE PAGE IF NECESSARY) :

Have you ever signed off a ship due to medical reasons?	Yes / No	No
Have you undergone any Surgery / Accident?	Yes / No	No
Do you have any health disability problems now?	Yes / No	No

1.12 BANK ACCOUNT DETAILS :

Account Holder's name :	
Name of the Bank :	Branch & Address : -----
Account No. :	
SWIFT CODE :	
ISM CODE :	
IFSC CODE :	MICR No. :

BOILER SUIT SIZE : _____

SAFETY SHOE SIZE : _____

Blood Group _____

Height : _____

Birth Mark (if any) : _____

DECLARATION:

I hereby affirm that all the information provided by me in this application is true and correct.

Applicant's signature

Date

Place

FOR OFFICE USE ONLY:

Checked on _____

With Mr./Ms. _____

Rep. of _____ (last employer) & received satisfactory / unsatisfactory report regarding his Professional experience & attitude.

By _____

Interviewed on _____

Found Satisfactory / Unsatisfactory

By _____

Acknowledgment Slip

For Oceanus Marine Service

Applicant Name :

Application No.

Rank :

S.R	Company	Vessel name	Vessel type	DWT/GRT	Year built	Type of engine (please give full details)	BHP	Rank	Sign on (dd/mm/yy)	Sign off (dd/mm/yy)	Duration (dd/mm/yy)	Reason for sign off
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												

Please state above records of previous services (Kindly start with your first ship)

Applicants Signature: _____

Date : _____

Place :