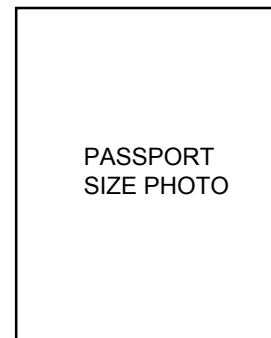


TRAINING SHIP RAHAMAN

REV. NO. 00
REV: DATE: 06/2009

STCW : PST / PSC & RB / PEFA / PMFA /
TFAM / PSSR / AFF / FPF / MCC

TSR:ALL:APPL:01
Page 1 of 2



PASSPORT
SIZE PHOTO

APPLICATION FORM

APPLICATION FORM FOR STCW COURSES : COURSE : _____

DURATION FROM _____ TO _____

NAME OF APPLICANT (BLOCK LETTERS) _____
SURNAME FIRST MIDDLE

NATIONALITY _____ DATE OF BIRTH _____
(DD/MM/YY)

C. D. C. NO. _____ PASSPORT NO. _____

INDIAN NATIONAL DATABASE (INDos No.) _____

GRADE / CERT. OF COMPETENCY No. _____

RANK / CATEGORY OF CANDIDATE _____

SHIPPING COMPANY _____

DECLARATION :

I HEREBY INDEMNIFY THE SMYSW FOUNDATION, ITS CAPTAIN SUPERINTENDENT AND ITS OFFICERS FROM ANY CLAIM WHATSOEVER ARISING FROM PERSONAL INJURY, DEATH, SICKNESS OR ANY OTHER HARM SUFFERED BY ME AS A RESULT OF MY UNDERGOING THE SAID COURSE. I CONSENT TO ANY EMERGENCY MEDICAL TREATMENT WHICH MIGHT BE NECESSARY, AND TO PAY ALL CHARGES CONNECTED THEREWITH TO THE FOUNDATION AND IN THE EVENT OF MY SUSTAINING ANY INJURY OR ILLNESS DURING THE PERIOD OF MY TRAINING AT 'T.S. RAHAMAN' WHICH MAY WARRANT HOSPITALISATION, I OR MY NEXT OF KIN / RELATIVE WHOSE NAME AND ADDRESS IS MENTIONED BELOW SHALL BEAR IN FULL, ALL THE EXPENSES INCURRED FOR MY HOSPITALISATION BEFORE MY DISCHARGE FROM THE HOSPITAL, AND ABSOLVE SIR MOHAMED YUSUF SEAMEN WELFARE FOUNDATION FROM ANY FINANCIAL OR OTHER RESPONSIBILITY, WHATSOEVER FOR THE SAID TREATMENT.

NAME, ADDRESS & TELEPHONE NO. NEXT OF KIN / RELATIVE :

E-MAIL: _____ PIN: _____ TELEPHONE NO. _____

THE FOLLOWING DOCUMENTS ARE HERE WITH ATTACHED :

1. ORIGINAL AND PHOTOCOPY OF CDC, PASSPORT, CERT. OF COMPETENCY AND RELEVANT BASIC STCW COURSE CERTIFICATE
2. ORIGINAL RECEIPT TOWARDS COURSE FEES PAID.
3. CERTIFICATE OF FITNESS FROM A REGISTERED MEDICAL PRACTITIONER.
4. ORIGINAL AND PHOTOCOPY OF PEFA/PST/FPFF AS REQUIRED.
5. 2 PASSPORT SIZE PHOTOGRAPHS.

SIGNATURE OF CANDIDATE : _____ DATE : _____

FOR OFFICE USE ONLY

FEES RECEIVED : YES / NO _____ RECEIPT NO. _____ DATE _____ PAID AT _____

RESIDENTIAL / NON RESIDENTIAL _____ CERTIFICATE NO. _____

SIGNATURE OF BOOKING CLERK _____

<p style="text-align: center;">CHECK LIST : TSR : PEFA / PST / PSSR / FPF CONDITIONS FOR ADMISSION</p> <ol style="list-style-type: none"> 1. All seafarers or prospective seafarers are eligible. 2. Identification Documents 3. Certificate of fitness from a Registered Medical Practitioner (Certificate should not be more than one month old on date of commencement of PST course) 4. 2 Passport size photographs <p>Checked by : _____</p>	<p style="text-align: center;">CHECK LIST FOR TSR : PMFA CONDITIONS FOR ADMISSION</p> <ol style="list-style-type: none"> 1. CDC/Passport 2. Must have at least 6 months Sea Service. 3. Photocopy of PEFA cert. or equivalent. 4. 2 Passport size photographs. <p>Checked by : _____</p>
<p style="text-align: center;">CHECK LIST FOR TSR : PSC & RB CONDITIONS FOR ADMISSION</p> <ol style="list-style-type: none"> 1. CDC / Passport 2. Must have sea service atleast 6 months . 3. Photocopy of PST cert. or equivalent. 4. Certificate of fitness from a Registered Medical Practitioner (Certificate not more than one month old on the date commencement of the course). 5. 2 Passport size photographs. <p>Checked by : _____</p>	<p style="text-align: center;">CHECK LIST FOR TSR : TFAM CONDITIONS FOR ADMISSION</p> <ol style="list-style-type: none"> 1. All seafarers or prospective seafarers are eligible. 2. Identification Documents 3. Photocopies of FPF and PEFA. Cert. or equivalent. 4. 2 Passport size photographs. <p>Checked by : _____</p>
<p style="text-align: center;">CHECK LIST FOR TSR : AFF CONDITIONS FOR ADMISSION</p> <ol style="list-style-type: none"> 1 Certificate of Competency OR proof of 6 months of sea service 2. CDC/Passport 3. Photocopy of FPF certificate or equivalent. 4. Medical fitness certificate from Registered Medical Practitioner (certificate should not be more than one month old on the date of commencement of course). 5. 2 Passport size photographs. <p>Checked by : _____</p>	<p style="text-align: center;">CHECK LIST FOR TSR : MCC CONDITIONS FOR ADMISSION</p> <ol style="list-style-type: none"> 1. CDC / Passport 2. COC / Grade 3. Photocopy of PMFA Certificate 4. 3 Passport size photographs <p>Checked by : _____</p>

ABBREVIATIONS

AFF	Advanced Fire Fighting
FPF	Fire Prevention and Fire Fighting
CDC	Continuous Discharge Certificate
DGS	Director General of Shipping
PSC & RB	Proficiency in Survival Crafts & Rescue Boats
PEFA	Proficiency in Elementary First Aid
PST	Personal Survival Techniques
PSSR	Personal Safety & Social Responsibility
PMFA	Proficiency in Medical First Aid
TFAM	Tanker Familiarisation
	Medical Care Course
	Training Ship "Rahaman"