


APPLICATION FOR

<input type="checkbox"/> New Application	<input type="checkbox"/> Revalidation of Endorsement	Vessel Name:
I request the recognition of the competency and/or the proficiency ad follows:		
<input type="checkbox"/> Master / II-2, II-3	<input type="checkbox"/> Chief Engineer III-2, III-3	<input type="checkbox"/> Oil Tanker V-1
<input type="checkbox"/> Chief Mate II-2	First Engineer, III-2, III-3	<input type="checkbox"/> Chemical Tanker V-1
<input type="checkbox"/> Officer of Nav. Watch II-1	<input type="checkbox"/> Second Engineer III-2, III-3	<input type="checkbox"/> Liquefied Gas Tanker V-1
<input type="checkbox"/> GMDSS Radio Operator IV-2	<input type="checkbox"/> Officer of Eng. Watch III-1	<input type="checkbox"/> SSO
<input type="checkbox"/> Alternative Certification VII-	<input type="checkbox"/> Electro-Technical Officer III-6	
1.Particulars of Seafarer: Last Name/Family Name		First Name (Given name):
		Middle Name:
Date of Birth:	Place of Birth:	Citizenship:
Height: (cm)	Colour of Eyes:	Colour of Hair:
COC Number:	Issuing Authority of COC:	Issue/Expiry Date:
GOC Number:	Issuing Authority of GOC:	Issue/Expiry Date:
2.Contact Details:		
Permanent Address(Street, City, Country):		
In case of Emergency please notify:		
Full Name:	Relationship:	Address:
3. Copy of Document that should accompany this application		4. Copy of Endorsements*
<input type="checkbox"/> Certificate of Competency	<input type="checkbox"/> Recent Scanned Photo (JPG)	<input type="checkbox"/> GMDSS
<input type="checkbox"/> STCW Endorsement	<input type="checkbox"/> Rating (Navigational Watch)	<input type="checkbox"/> Oil Tanker
<input type="checkbox"/> Seaman's Book (And Sea Experience)	<input type="checkbox"/> Rating (Able Seafarer Deck)	<input type="checkbox"/> Chemical Tanker
<input type="checkbox"/> Passport	<input type="checkbox"/> Rating (Electro-Technician)	<input type="checkbox"/> Liquefied Gas Tanker
<input type="checkbox"/> Medical Certificate	<input type="checkbox"/> Ship Security Officer	<input type="checkbox"/> Ro-Ro Passenger Ships
Issued on:	<input type="checkbox"/> Security Training	<input type="checkbox"/> Passenger Ships (other than Ro-Ro)
	Designated Security Duties	*If Applicable
5. The following declaration should be completed and signed by the Master/Owner		
<p>The undersigned declares that the officer described in this application, and whose documents or copies are attached, is proficient in spoken and written in English to a standard sufficient for service on a Sierra Leone ship and necessary for the function to be performed on board. Knowledge of Maritime Legislation of Sierra Leone for Masters and Officers serving at Management level: For designated Officers, the undersigned declares that the officer whose particulars are given in this form is competent and has knowledge of Sierra Leone Shipping Legislation and its application. (The Merchant Shipping Act, 2003, Part X, XI, XII, XIII, XIV)</p>		
ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT		
Date of Application	Name and Signature of Manager/Owner	Signature of Applicant