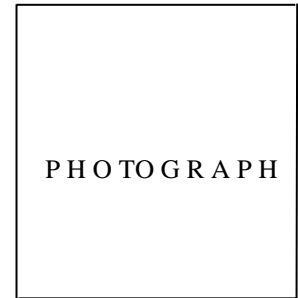


|                                     |  |  |
|-------------------------------------|--|--|
| <b>SINASTA MARITIME<br/>PVT LTD</b> | <b>RPSM 01 APPLICATION FORM</b>  | <b>SEC 12 - RPSM 01</b>                  |
| <b>DEPT: Personnel Department</b>   | <b>FREQUENCY :EVERY NEW APPLICANT OR UPDATE<br/>EXISTING SEAFARER RECORDS.</b> | <b>REV. No.: 00<br/>DATE: 15.11.2019</b> |

**A P P L I C A T I O N F O R M**

|                                      |                     |
|--------------------------------------|---------------------|
| Post Applied for                     | Date of Application |
| Willing to WORK IN LOWER RANK YES/NO |                     |
| Available to join from:              |                     |



|                      |             |                   |
|----------------------|-------------|-------------------|
| Name as per Passport |             |                   |
| (First Name)         | (Mid. Name) | Last (or) Surname |

|               |                |             |
|---------------|----------------|-------------|
| Date of Birth | Place of Birth | Nationality |
|               |                |             |

|                      |             |              |             |             |                      |
|----------------------|-------------|--------------|-------------|-------------|----------------------|
| Passport No.:        | Issue Date: | Issue Place  | Exp. Date   | ECNR YES/NO | Verified<br>(office) |
| U.S. Visa            | Issue Date: | Issue Place: | Valid till: |             |                      |
| Income Tax PAN No. : |             |              | INDOS No. : |             |                      |

|  |                              |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |
|--|------------------------------|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|
| <b>Permanent Address :</b><br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>Pin : <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |                              |  |  |  |  |  |  |  | <b>Present Address / Correspondence address :</b><br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>Pin : <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |  |  |  |  |  |  |  |
|  |                              |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |
|  |                              |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |
| Tel : _____ Nearest Airport : _____<br>e-mail : 1.<br>2.   | Tel : _____<br>MOB: 1.<br>2. |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |

**Academic Qualification : (Enter Degree /Diploma / School)**

| Degree | University | Yr. Passed | Grade | Verified<br>(office) |
|--------|------------|------------|-------|----------------------|
|        |            |            |       |                      |
|        |            |            |       |                      |
|        |            |            |       |                      |
|        |            |            |       |                      |

|                     |  | Date Commenced | Date Completed | Verified<br>(office) |
|---------------------|--|----------------|----------------|----------------------|
| PRE-SEA TRAINING    |  |                |                |                      |
| Institute           |  |                |                |                      |
| Apprenticeship with |  |                |                |                      |

|                                     |  |  |
|-------------------------------------|--|--|
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**Highest Competency Certificate Now Held**

| Authority | Comp. Cert.<br>Grade | Cert. No. | Date of<br>Issue | Place of<br>Issue | Valid Till | Verified<br>( office) |
|-----------|----------------------|-----------|------------------|-------------------|------------|-----------------------|
| Indian    |                      |           |                  |                   |            |                       |
| U.K.      |                      |           |                  |                   |            |                       |
| Panama    |                      |           |                  |                   |            |                       |
| Singapore |                      |           |                  |                   |            |                       |
| Sri Lanka |                      |           |                  |                   |            |                       |
| Liberian  |                      |           |                  |                   |            |                       |
|           |                      |           |                  |                   |            |                       |

**CDC Details:-**

| Document     | CDC NUMBER | Date of Issue | Place of Issue | Valid Till | Verified<br>( office) |
|--------------|------------|---------------|----------------|------------|-----------------------|
| CDC (Indian) |            |               |                |            |                       |
| CDC          |            |               |                |            |                       |
| CDC          |            |               |                |            |                       |

**STCW COURSES ATTENDED AND CERTIFICATES HELD**

| Course/Certificate                                   | Certificate No. | Date | Place issued | Valid Till | Verified |
|--|-----------------|------|--------------|------------|----------|
| Personal Survival Techniques /PSC & Rescue boat      |                 |      |              |            |          |
| Elementary/Medical First A/c/ Ship Master's Medicare |                 |      |              |            |          |
| Fire Prevention & Fire Fighting /AFF                 |                 |      |              |            |          |
| P.S.S.R.   |                 |      |              |            |          |
| MMD Watch Keeping Certificate (for crew)             |                 |      |              |            |          |
| Revalidation   |                 |      |              |            |          |
| ISPS-SSO   |                 |      |              |            |          |
| BRM/BTM Certificate                                  |                 |      |              |            |          |
| Radar Simulator ARPA                                 |                 |      |              |            |          |
| Radar Observer/RANSCO                                |                 |      |              |            |          |
| RCC/RT   |                 |      |              |            |          |
| G.M.D.S.S. (IND-UK)                                  |                 |      |              |            |          |
| G.M.D.S.S. ENDORSEMENT (IND-UK)                      |                 |      |              |            |          |
| Oil Tanker Familiarization                           |                 |      |              |            |          |
| Chemical Tanker Familiarization                      |                 |      |              |            |          |
| TASCO  |                 |      |              |            |          |
| CHEMCO / GASCO                                       |                 |      |              |            |          |
| Oil Tanker DCE                                       |                 |      |              |            |          |
| Chemical Tanker DCE                                  |                 |      |              |            |          |
| Yellow Fever Vaccination Details                     |                 |      |              |            |          |
| Cook's Certificate (for rank of Ch Cook)             |                 |      |              |            |          |
| Security Duties for Crew                             |                 |      |              |            |          |
|  |                 |      |              |            |          |
|  |                 |      |              |            |          |
|  |                 |      |              |            |          |
| TAR Book issued (for trainee ratings)                |                 |      |              |            |          |
|  |                 |      |              |            |          |
|  |                 |      |              |            |          |
|  |                 |      |              |            |          |

|                                     |  |  |
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**Sailing Experience** :(Starting with most recent)

| Company Served | Ship | Vsl*<br>Type | DWT<br>GRT | Engine<br>(Engr.<br>Only) | BHP | Rank | Actual Sea Service |    |    |         |    |    |                |
|----------------|------|--------------|------------|---------------------------|-----|------|--------------------|----|----|---------|----|----|----------------|
|                |      |              |            |                           |     |      | From Date          |    |    | To Date |    |    | Total<br>Month |
|                |      |              |            |                           |     |      | dd                 | mm | yy | dd      | mm | yy |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |
|                |      |              |            |                           |     |      |                    |    |    |         |    |    |                |

**SUMMARY :** (as applicable) Mention total period of sea Services in months :

|                              |  |          |
|------------------------------|--|----------|
| Master/Ch Engineer :         | 2 <sup>nd</sup> Off/3 <sup>rd</sup> /Eng : | EI Off : |
| Ch Off/2 <sup>nd</sup> Eng : | 3 <sup>rd</sup> Off/ 4 <sup>th</sup> Eng : | Fitter : |

|                           |          |
|---------------------------|----------|
| Are you computer literate | Yes / No |
| If yes give details       |          |
|                           |          |

**PLEASE GIVE REFERENCE OF ATLEAST TWO PERSONS (not relatives) :**

|    | Name | Full Address | Tel. (Office) | Tel. (Residence) |
|----|------|--------------|---------------|------------------|
| 1. |      |              |               |                  |
| 2. |      |              |               |                  |

**NEXT OF KIN DETAILS :**

|          |               |
|----------|---------------|
| Name:    | Relationship: |
| Address: |               |
|          |               |
|          |               |
|          |               |
|          |               |
| Tel. :   |               |

|                                     |  |  |
|-------------------------------------|--|--|
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| Name of spouse (if married) and details of dependents |              |               |              |               |                |
|---|--------------|---------------|--------------|---------------|----------------|
| Name  | Relationship | Date of Birth | Passport No. | Date of issue | Date of Expiry |
|   |              |               |              |               |                |
|   |              |               |              |               |                |
|   |              |               |              |               |                |
|   |              |               |              |               |                |

**BANK PARTICULARS :**

|                |                |                 |
|----------------|----------------|-----------------|
| Bank Name :    | NRO :<br>NRE : | Branch:         |
| Bank A/c No. : |                |                 |
| Bank Address   |                | DD Payable at : |
|                |                |                 |
|                |                |                 |
|                |                |                 |

|                          |  |
|--------------------------|--|
| Available to join from : |  |
|--------------------------|--|

Boiler suit size :  
Safety Shoe size :

- I do hereby declare that all information furnished above is to the best of my knowledge and belief .

\_\_\_\_\_  
Signature

Office

All documents verified against originals

\_\_\_\_\_  
Fleet Department