

OCEANBRAVE SHIPPING PVT LTD.	A16 "APPLICATION FOR SHIP PERSONNEL"
DEPT: ALL	FREQUENCY : WHEN JOINING SHIP

St.No. ....

**OCEANBRAVE SHIPPING PVT. LTD.**  
 319, Chawla Complex, Tel: 91-22-65262868  
 Sector- 15, Plot- 38  
 CBD Belapur- 400 614

**APPLICATION FORM**

Post Applied For : \_\_\_\_\_  
 Date of Availability : \_\_\_\_\_

**PERSONAL INFORMATION**

INDOS No. : \_\_\_\_\_

Name (In Block Letters):	_____
Date / Place of Birth :	_____ Nationality : _____
Permanent Address :	_____ Tel : _____
	Email id : _____
Present Address :	_____ Tel : _____
Qualification :	_____ Pre Sea Training : _____
Marital Status :	_____ No. of Children / Age : _____
Next of Kin Name :	_____ Relationship : _____
Address./ Tel nos. /	_____ Tel : _____
	Email : _____
Safety Gear Size (Boiler Suit / Safety Shoes) :	_____

**TRAVEL DOCUMENTS**

Passport No :	Issued At: _____	On: _____	Valid Till: _____
Seaman Book (National) No :	Issued At: _____	On: _____	Valid Till: _____
Seaman Book (Other) No:	Issued At: _____	On: _____	Valid Till: _____
U.S. Visa (C/D) Valid Till:	_____	Yellow Fever Valid Till:	_____

**CERTIFICATES : COC / WATCHKEEPING**

Indian COC No. _____	Issued At: _____	On _____	Valid Till: _____
Other (Grade): _____	Issued At _____	On _____	Valid Till : _____
Deck/Engine Watchkeeping Cert. No. _____	Issued At _____	On _____	

**S.T.C.W COURSES**

Courses	Certificates No.	Date/Place of Issue
1. Adv. / Fire Prevention & Fire Fighting		
2. P.S.C.R.B. / P.S.T./S.A.S.		
3. P. S. S. R.		
4. Medical First Aid / Elementary First Aid / Medicare		
5. G. M. D. S. S.		
6. R. O. C. / A. R. P. A. / NARAS		
7. TASC0 / Tanker Familiarization		
8. D. C. Endorsement (Oil / Chem. / Petro)		
9. SSO / ISPS		

**OCEANBRAVE SHIPPING PVT. LTD.**  
**SEA SERVICE**

(Please write in Ascending Order)

Owners / Manning Agent	Vessel	Flag	Type of Vessel	G.R.T.	Engine Type	B.H.P.	Rank	From (dd/mm/yyyy)	To (dd/mm/yyyy)

REFERENCE :	
COMPANY NAME :	COMPANY NAME :
PERSON IN CHARGE :	PERSON IN CHARGE :
TEL. NO. :	TEL. NO. :

Date: \_\_\_\_\_

Applicant's  
Signature: \_\_\_\_\_

REFERENCE VERIFIED : DATE BY (NAME)	REMARKS :
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Received By: \_\_\_\_\_

Approved By: \_\_\_\_\_

REMARKS :
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