|  |  |  |
| --- | --- | --- |
|  |  | Personal details Name:  ID:  DOB: MM/DD/YY  Sex: Elija un elemento.  POB:  Address:  Phone / Cellphone:  Email:  Blood type: Elija un elemento.  Weight (kg/pounds):  Grade Point Average / 3.00: |
| SEAMAN’S BOOK Elija un elemento.  SB Number:  Expiration date: MM/DD/YY TRAVEL DOCUMENTS Passport Number:  Exp. Date: MM/DD/YY  C1/D US Visa: Elija un elemento.  Exp. Date: MM/DD/YY Medical documentationYellow Fever: Hepatitis A  B  C  COVID19 1st  2nd  Booster  PMA Medical Fitness Standards Certificate for Seafarers  Exp. Date: MM/DD/YY emergency contacts **CONTACT 1:**  Name:  Relationship: Relative  Contact Number:  Email:  **CONTACT 2:**  Name:  Relationship: Relative  Contact Number:  Email:  As of MM/DD/YY |  | Practical Experience[Please insert: Company – Rank / Position] Enrollment date: MM/DD/YY  Discharge date: MM/DD/YY  **[Please insert: Company – Rank / Position]**  Enrollment date: MM/DD/YY  Discharge date: MM/DD/YY  **[Please insert: Company – Rank / Position]**  Enrollment date: MM/DD/YY  Discharge date: MM/DD/YY  **EXPERIENCE / RESPONSIBILITIES / ACHIEVEMENTS**  Haga clic o pulse aquí para escribir texto. imo Courses **NAME Exp. Date**   |  |  | | --- | --- | | Security Awareness Training For All Seafarers | MM/DD/YY | | Fire Prevention and Fire Fighting | MM/DD/YY | | Designated Security Duties | MM/DD/YY | | Personal Safety and Social Responsibilities. | MM/DD/YY | | Elementary First Aid. | MM/DD/YY | | Personal Survival Techniques. | MM/DD/YY | | Proficiency in Survival Craft and Other than Fast Rescue Boat. | MM/DD/YY | | Basic Training for Oil and Chemical Tanker Cargo Operations. | MM/DD/YY | | Proficiency in Crisis Management and Human Behaviour Training Including Passenger Safety, Cargo Safety and Hull Integrity Training. | MM/DD/YY | | Crowd Management. | MM/DD/YY | | Crisis Management and Human Behaviour. | MM/DD/YY | |