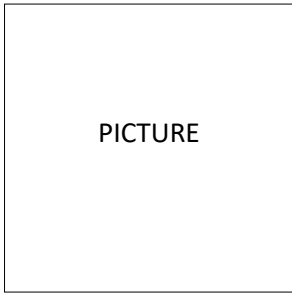


APPLICATION FOR EMPLOYMENT

3RD Flr. Delgado Bldg. 637 Bonifacio Drive, Port Area, Manila, Philippines
 Tel. Nos. 6686151 / 6681256 / 404-1252
 E-Mail: manning@sssi.com.ph / operation_group@sssi.com.ph



Date _____ Contact No. _____
 Position Applied _____ License _____

PERSONAL INFORMATION

Name _____
Last Name First Name Middle Name
 Address _____

Date of Birth _____ Age _____ Place of Birth _____ Email Address: _____
 Height _____ Weight _____ Blood Type _____ Civil Status _____
 Name of Spouse (Parents if not married) _____ Contact No. _____ No. of Children _____
 SSS No. _____ Tin _____ Marina ID No. _____ SRN (POEA) _____
 Highest Education Attainment(Course) _____
 School _____ Year Graduated _____
 Size of Safety Shoes _____(inches) Size of Working Clothes _____ Smoking? _____

LICENSEs / CERTIFICATEs / TRAININGs / OTHERs :

Seaman's Book No.	_____	Date Issued	_____	Validity	_____
Passport No.	_____	Date Issued	_____	Validity	_____
US Visa	_____	Date Issued	_____	Validity	_____
MCV No.	_____	Date Issued	_____	Validity	_____
Phil. License	_____	Date Issued	_____	Validity	_____
Panama License	_____	Date Issued	_____	Validity	_____
Panama GMDSS	_____	Date Issued	_____	Validity	_____
C.O.C./License No.	_____	Date Issued	_____	Validity	_____
C.O.E. No.	_____	Date Issued	_____	Validity	_____
GOC License No.	_____	Date Issued	_____	Validity	_____
AIS Certificate No.	_____	Date Issued	_____	Validity	_____
SSO/SSA/ Cert. No.	_____	Date Issued	_____	Validity	_____
SSBT with BRM	_____	Date Issued	_____	Validity	_____
BT	_____	Date Issued	_____	Validity	_____
PSCRB	_____	Date Issued	_____	Validity	_____
AFF	_____	Date Issued	_____	Validity	_____
Yellow Fever	_____	Date Issued	_____	Validity	_____
MEFA	_____	Date Issued	_____	Validity	_____
MECA	_____	Date Issued	_____	Validity	_____
ECDIS Generic	_____	Date Issued	_____	Validity	_____
ECDIS Specific	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
SRRO Cert. No.	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
GMDSS Cert. No.	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
ARPA Cert. No.	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
SATCOM	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
MARPOL	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
CHCC	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
MLSO	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
Welding Course	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
BT COP	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
PSCRB COP	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
AFF COP	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
MEFA COP	_____	Date Issued	_____	Validity	<u>PERMANENT</u>
MECA COP	_____	Date Issued	_____	Validity	<u>PERMANENT</u>

Referred by: _____ Relationship: _____

Position	Vessel Name	Type	Engine	Flag	Manning Agency	Principal	Trading Area	GRT	KW	Embarked (mm/dd/yyyy)	Disembarked (mm/dd/yyyy)	Length of service	Reason of Discharge

SEA SERVICE RECORDS / SERVICES (LATEST)

Character References

Name	Position	Company/Address	Contact Number

Beneficiary / Allotee

Name: _____
 Relationship: _____
 Address: _____

Name of Father (If Living) _____
 Name of Mother (If Living) _____

Beneficiary in case of Accident/Death

Name: _____
 Relationship: _____
 Address: _____
 Contact No.: _____

Notify in case of Accident/Death

Name: _____
 Relationship: _____
 Address: _____
 Contact No.: _____

I, hereby, certify that all data/information contained in this application are complete and correct. Misinformation or omission which tend to mislead will be considered a cause for my dismissal at the same time discovered and unqualifiedly waive my rights I have to contest dismissal on such basis. All expenses that will incurred for my repat/reliever will be for my account including airfare.

I, _____ am willing and voluntarily allowing any and all SSSI personnel, staff and officers and its counterparts to view, review, process and share the information to all concern counterparts as a matter of procedure in the Recruitment process and shall relieve from any administrative, civil and criminal liabilities including the provision of Data Privacy Act.

Signature

Interviewed by: _____
 Date: _____

Remarks: