



MLC Certified

DANO Sp. z o.o.



Association

APPLICATION FOR APPOINTMENT AS SEAGOING PERSONNEL

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APPLICATION FOR POSITION AS		OTHER POSITION (IF ANY)	
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1. PERSONAL DETAILS					
TITLE MR/MRS/MISS		SEX	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	
SURNAME					
FIRST NAME		OTHERS NAMES			
DATE OF BIRTH		PLACE OF BIRTH			
NATIONALITY		MARITAL STATUS			
NEAREST INTERNATIONAL AIRPORT:					
2. ADDRESS					
NO & STREET					
CITY					
POST CODE					
COUNTRY					
TEL. NO.					
MOBILE					
E-MAIL					
3. NEXT OF KIN					
FULL NAME		RELATIONSHIP			
ADDRESS					
CITY		COUNTRY			
TEL. NO.		MOBILE			
4. CHILDREN					
NAME OF CHILD		DATE OF BIRTH	SEX		
			M <input type="checkbox"/>	F <input type="checkbox"/>	
			M <input type="checkbox"/>	F <input type="checkbox"/>	
			M <input type="checkbox"/>	F <input type="checkbox"/>	
5. TRAVEL DOCUMENTS					
TYPE	DOCUMENT NO.	ISS.DATE	EXP. DATE	ISS. BY (AUTHORITY)	PLACE OF ISSUE
PASSPORT					
SEAMAN'S BOOK					
OTHER SEAMAN'S BOOK					
6. EDUCATION					
SCHOOL NAME		FROM		TO	

7. PROFESSIONAL QUALIFICATION / CERTIFICATE OF COMPETENCY

CERTIFICATE NAME	NUMBER	ISSUE DATE	EXPIRY DATE	ISSUED BY (AUTHORITY)	ISSUED AT

8. LANGUAGES

ENGLISH	FLUENT	<input type="checkbox"/>	GOOD	<input type="checkbox"/>	FAIR	<input type="checkbox"/>	POOR	<input type="checkbox"/>
	FLUENT	<input type="checkbox"/>	GOOD	<input type="checkbox"/>	FAIR	<input type="checkbox"/>	POOR	<input type="checkbox"/>

9. MARINE COURSES

COURSE NAME	NUMBER	ISSUE DATE	EXPIRY DATE	ISSUED BY (AUTHORITY)	ISSUED AT
PERSONAL SURVIVAL TECH.					
BASIC FIRE FIGHTING					
ADV. FIRE FIGHTING					
ELEMENTARY FIRST AID					
MEDICAL FIRST AID					
MEDICAL CARE					
PERS. SAFETY & SOC. RESP.					
PROF. IN SURV. CRAFT & RB					
FAST RESCUE CRAFT					
G.M.D.S.S.					
A.R.P.A.					
RADAR OBSERVATION					
HAZMAT					
SECURITY AWARENESS					
DESIG. SECURITY DUTIES					
SHIP SECURITY OFFICER					
HUET					
BOSIET					
HLO COURSE					
HDA COURSE					
DG BY AIR COURSE					
ENGINE TEAM MANAGEMENT					
BRIDGE TEAM MANAGEMENT					
ELECTRICAL MANAGEMENT					
DP SYSTEM MAINTENANCE					
DP BASIC					
DP ADVANCED					
DP UNLIMITED					
CRANE OPER. STAGE (1,2,3)					
OTHER:					

10. HEALTH CERTIFICATE

FLAGE STATE	NUMBER	ISSUE DATE	EXPIRY DATE	ISSUED BY (AUTHORITY)	ISSUED AT
HEALTH CERTIFICATE					
DRUG/ALCOHOL TEST					
YELLOW FEVER					

