



APPLICATION FORM

FOR ISSUE OF CERTIFICATE OF COMPETENCY (STCW 2010) FOR OFFICERS OF THE DECK AND ENGINEERING DEPARTMENTS

IMPORTANT – BEFORE completing this form, please ensure you have read fully the guidance notes and instructions below:

1 PERSONAL DETAILS	
FULL NAME	
DATE OF BIRTH	DD/MM/YYYY
PASSPORT NO	
	PERMANENT
ADDRESS	
CITY/TOWN	
STATE	
PIN CODE	
TELEPHONE NO	
MOBILE NO	
EMAIL ID	

2 CERTIFICATE APPLIED FOR		Choose the appropriate CoC by a tick [√]	
CERTIFICATE	CAPACITY	STCW REFERENCE	Tick [√]
Certificate of Competency	MASTER	II/2	
Certificate of Competency	CHIEF MATE	II/2	
Certificate of Competency	SECOND MATE	II/1	
Certificate of Competency	FIRST ENGINEER	III/2	
Certificate of Competency	SECOND ENGINEER	III/1	
Certificate of Competency	THIRD ENGINEER	III/1	

3 CHECK LIST		You will need to submit the following documentation in self attested photocopy	
If you are already holding a Certificate of Competency or Service you must send it in with this application and give the following details			
Certificate Type	Certificate No	Capacity	Country Issued
Certificate of Competency / Service			
Continuous Discharge Certificate			

3 A BASIC DOCUMENTATION		Tick [√]
PASSPORT		
CERTIFICATE OF SERVICE & SEA SERVICE CERTIFICATE (FOR OFFICERS)		
VALID MEDICAL FITNESS CERTIFICATE		
TWO PASSPORT SIZE PHOTOGRAPHS		



3 B DETAILS OF STCW CERTIFICATION (MANDATORY FOR ALL APPLICANTS)

NAME OF CERTIFICATE	INSTITUTE NAME	CERTIFICATE NO	ISSUE DATE
BASIC COURSE			
STSDSS			
FPFF			
MFA/MMC			
AFF			
PSCRB			

3 C DETAILS OF CERTIFICATION (AS APPLICABLE)

NAME OF CERTIFICATE	INSTITUTE NAME	CERTIFICATE NO	ISSUE DATE
ROSC			
ARPA			
RANSKO			
ECDIS			
GMDSS General Operators Certificate of Competency			
SMS			
Master's Refreshers & Updating Course (MR&UT)			
SSOC			
OTF			
STPOTO			
Full Watch Keeping Certificate			
Engine Room Watch Keeping Certificate (for Engineer Officers)			
Boiler room Watch Keeping / IC Engine Competency/ GT Engine competency certificate (for Engineering Sailors)			



3 D SEA SERVICE

Take details from Continuous Discharge Certificate (CDC)

The sea service may be supported by testimonials, which must be signed by the Master.

ALL RELEVANT SEA SERVICE MUST BE LISTED. If there is insufficient space, please continue on a separate sheet. **LENGTH OF VOYAGE:** this must be given in calendar months and days, eg from 10 April to 20 Jun = 2 months and 12 days. Odd days should be added together and calculated at 30 days to the month.

¹ Deck officers to indicate gross tonnage and Engineer Officers to indicate the Registered Power in kW.

² Type – Deck officers should state whether: Tanker, Cargo, Passenger, RO-RO, Supply, Tug, Drilling, Survey, stand-by, Yacht, etc – if Yacht please provide vessel length in meters. Engineer Officers to state Steam or Motor.

³ Voyage – Deck officers should give the area in which the ship traded using the following codes: U- Unlimited, NC – Near Coastal Area

**4 DECLARATION & SIGNATURE****(The maximum penalty for a false declaration is US \$ 500)**

I declare that the data contained in this application is to the best of my knowledge, true and complete. I also declare that the documents are genuine. I consent to any processing and verification of the data contained in this application by the IMS Registry (including any processing necessary to establish the authenticity and validity of the issued certificate).

Please sign this form in the centre of the space
opposite, in **BALL POINT PEN**, which will be transferred
to your new STCW 2010 certificate

DATE:

IMPORTANT – KEEP WITHIN BORDER

FAILURE TO COMPLY WITH THIS INSTRUCTION WILL INVALIDATE
THE APPLICATION

Signature _____ Date _____

5 OFFICIAL USE ONLY

Medical Standards Met	Yes	No
Minimum Sea Service requirements met	Yes	No
All certificates supplied	Yes	No
All documentation supplied	Yes	No

Reasons for Rejection	
Name	
Signed	
Date	

Certificate	Date of Issue	Date with effect from	Issuing Officer's Signature



GUIDANCE NOTES FOR THE COMPLETION OF THIS APPLICATION FORM

- **PLEASE ENSURE THAT YOU READ AND UNDERSTAND THESE NOTES BEFORE COMPLETING THE FORM**
- Please complete this form in **BLOCK LETTERS** and in black ink. If a section is not relevant to your application enter **NA**.
- **ENSURE YOU COMPLETE THIS FORM IN FULL – FAILURE TO DO SO MAY MEAN WE WILL HAVE TO RETURN YOUR APPLICATION TO YOU AND WILL RESULT IN DELAY TO YOUR APPLICATION BEING PROCESSED.**

1. Enclose all documents necessary to establish your eligibility for assessment and issue of an STCW 2010 Certificate of Competency. You must send in Photocopy or scan of documents. ORIGINALS will have to be submitted when requested. All documents mentioned in Para 3 should be attached.
2. If eligible you will be provided with a Interim Certificate of Competency (Blue Chit) as applicable.

1 PERSONAL DETAILS

1. Enter your personal details in the boxes provided. Your name should be given **IN FULL** and should be given in the same format as appears in your passport.
2. Tel No and Mob No should have the ISD & STD codes.

2 CHECK LIST

1. Before a Certificate of Competency can be issued, you will need to submit certain documentation as specified. Scanned copies of the required documentation should be attached if the application is being forwarded by email.
2. Please write **NA** in columns which are not applicable.

3 DECLARATION & SIGNATURE

Please read the declaration. Once you are sure that the information you have given is, to the best of your knowledge, true and complete, and that the documents submitted are genuine, you should sign the declaration with your usual signature, including the date. **MAXIMUM OF \$ 500 WILL BE CHARGED PENALTY FOR FALSE DECLARATION.**