



Mauritius Shipping Corporation Ltd

Office: Nova Building,
1, Military Road, Port Louis 6 11601, Mauritius
Tel: (230) 217 2285 Fax: (230) 242 5245 E mail: info@mscl.mu
Website: www.mscl.mu

SEAMAN'S EMPLOYMENT APPLICATION FORM

POSITION APPLIED FOR:	SURNAME:	PHOTO
SECOND CHOICE (IF ANY):	FIRST NAME:	
	AVAILABLE FROM:	

PERSONAL DETAILS

DATE OF BIRTH:	PLACE OF BIRTH:
NATIONALITY:	MARITAL STATUS:
SEA TIME: (Total number of months sailed as per discharge book)	
SHOES:	I.D.NO:
<u>LANGUAGES</u>	
SPOKEN:	WRITTEN:
NAT. PEN. CARD NO:	NEAREST AIRPORT:
ADDRESS:	PHONE:
NEXT OF KIN:	PHONE:

DOCUMENTS

DOCUMENTS	NO.	DATE OF ISSUE	ISSUING AUTHORITY	PLACE OF ISSUE	VALID UNTIL
SEAMAN'S PASSPORT					
PASSPORT					
US VISA					
MEDICAL CERTIFICATE					
CHARACTER CERTIFICATE					

HOBBIES, INTERESTS (IF ANY)		
SIGNATURE:	DATE:	PLACE:

EDUCATIONAL BACKGROUND (ACADEMIC/ TECHNICAL/ PROFESSIONAL)

LEVEL OF EDUCATION	AWARDING BODY	DATES		QUALIFICATIONS OBTAINED
		FROM	TO	
PRIMARY				
SECONDARY				
TERTIARY				

PROFICIENCY COURSES FOR SERVICE AS SEAMAN

STCW COURSES	CERTIFICATES DETAILS				
	NO.	PLACED ISSUED	DATE	EXPIRES	ISSUED BY
Basic Safety Training					
Crisis Management & Human Behaviour					
Crowd Management & Safety Training					
Certificate of Proficiency in Security Designated Duties					

ANY OTHER COURSES FOLLOWED

NAME OF COURSE	DATE FOLLOWED	ISSUED BY

PREVIOUS EXPERIENCE

POSITION	NAME OF ORGANISATION	DATE	
		FROM	TO

EXPERIENCE IN SEA SERVICE

Sea Service during last five years (count backwards)

Rank	Vessel's				Main engine		Ship-owner/Manager	From (mm.yy)	To (mm.yy)
	Name	Flag	Type	DWT	Type	HP			

Remarks (to be filled by office only)

.....

Signature _____

Date _____