

"Virtu", Ta' Xbiex Terrace, Ta'Xbiex MSD 11, Malta. Telephone: (+356) 2349 1000 Facsimile: (+356) 2131 4533

E-mail: admin@virtuferries.com

## **EMPLOYMENT APPLICATION FORM**

#### **PERSONAL DETAILS:**

COURSES SCHOOL COLLEGE ACADEMY

	Specialisat	ion	PI	ace			Durati	on			
MARITIME E	DUCATION	N:									
ID CARD											
SEAMAN'S D	DISCH. BOO	K									
CIVILIAN PASSPORT											
1				Place of Iss	Issue Issued On		1	Valid Till			
DENTITY DO	CUMENTS	<b>S</b> :									
HEIGHT:	(cm)	WEIGHT:	(kg	g)   SHOES S	SHOES SIZE (EUR): OVERALL SIZE (EUR):						
				\	~~~~~~·	T -			/ <del></del> :		
TELEPHONE:											
ADDRESS:				PRESEN	PRESENT ADDRESS:						
RELATIONSE											
E-MAIL: NEXT OF KIN	]·										
MOBILE TEL:	•										
HOME FAX:											
HOME TEL:				PERMAI	NENT ADD	RESS:					
	TRESE	12 211 112,			☐ divorced ☐ widow/widower						
		NT RANK:			☐ married ☐ single						
		NALITY:									
FIIOTO		OF BIRTH:	1111/yy).		MARITAL STATUS:						
РНОТО	DATE	OF BIRTH (dd/m	m/vv/).	/ /	SEX: □ male □ female   AGE:						
	SURNA	ME:				CEM [			1		
	FIRST N	FIRST NAME:									
	KAINN	APPLIED FOR:									

## **CERTIFICATION:**

Certificate:	Certificate No:	Place of Issue:	Issued On	Valid Till
Master Mariner Reg. II/2				
Chief Mate Reg. II/2				
Officer in Charge of Navigational				
Watch Reg. II/1				
GMDSS GOC				
Malta Administration Endorsement				
International Ship and Port Facilities				
Security Certificate (ISPS Code).				
Chief Engineer Reg. III/2				
Officer in Charge of an Engineering				
Watch Reg. III/1				
Rating Forming Part of a Navigational Watch Reg. II/4				
Rating Forming Part of an				
Engineering Watch Reg. III/4				
Personal Survival Techniques Reg. VI/1-1				
Medical First Aid Reg. VI/4-1				
Medical Care Reg. VI/4-2				
Fire Prevention and Fighting				
Reg.VI/1-2				
Advanced Fire Fighting VI/3				
Personal Safety and Social				
Responsibilities Reg. VI/1-4				
Crisis Management and Human Behaviour				
Survival Craft and Rescue Boat Reg.				
VI/2-1				
Crowd Management Reg. V/2-1				
Passenger / Cargo Safety and Hull				
Integrity Reg. V/2-4				
Personnel Providing Direct Service to				
Passengers Reg. V/2-3				
Medical Examination Reg. 1/9				

# ADDITIONAL CERTIFICATION:

Certificate:	Certificate No:	Place of Issue:	Issued On	Valid Till

LANGUAGES:	Fluent	Good	Fair

## **PREVIOUS EMPLOYMENT RECORD:** (for the last three years in chronological order)

Name of Owners/ Managers	Tel No Fax No	Name of The Vessel	Vessel Type	Year Of Built	Flag	GRT	Type of Engine	BHP/ KWT	Rank	Signed on (dd/mm/yy)	Signed off (dd/mm/yy)

Availability Date:	
Application Date:	Signature:

YOU ARE KINDLY ASKED TO ATTACH COPIES OF ALL DOCUMENTS REFERRED TO IN THIS APPLICATION
PLEASE BE ADVISED THAT UPON JOINING OF THE VESSEL IT IS OBLIGATORY TO PRESENT ORIGINAL DOCUMENTS TO THE MASTER