



APPLICATION FORM

(Please fill with big letter only)

PHOTO
SIZE:
4,5x3,5

PERSONAL DATA

POSITION APPLY		READINESS TO START	
NAME		SURNAME	
DATE OF BIRTH		PLACE OF BIRTH	
HOME ADDRESS		POST CODE, CITY	
NATIONALITY		E-MAIL	
TELEPHONE		MOBILE/FAX	
MATRIMONIAL STATUS		NUMBER OF SUPPORTED CHILDREN UNDER AGE OF 18	
NEXT OF KIN NAME & ADDRESS			
NEXT OF KIN TELEPHONE/MOBILE		RELATIONSHIP	
NAME OF BANK		ADDRESS OF BANK, POST CODE, CITY	
ACCOUNT NO		SWIFT	
EURO			
OWNER OF THE BANK ACCOUNT		HOME ADDRESS OF THE OWNER	

DOCUMENTATION

	NUMBER	ISSUED	PLACE	VALID
PASSPORT				
SEAMAN'S BOOK				
TYPE OF LICENSE				
NO OF LICENSE:				

STCW-95 COURSES	NUMBER	ISSUED	VALID
GMDSS			
BASIC SAFETY TRAINING IN PERSONAL SAFETY & RESPONSIBILITY			
BASIC SAFETY TRAINING IN PERSONAL SURVIVAL TECHNIQUES (ITR)			
CERTIFICATE OF PROFICIENCY IN SURVIVAL CRAFT & RESCUE BOATS			
TRAINING IN FIRST/ ADVANCED FIRE FIGHTING*			
TRAINING IN MEDICAL CARE/ FIRST AID/ELEMENTARY FIRST AID *			
HEALTH CERTIFICATE			
ENDORSEMENTS (if any)			
ST. VINCENT & THE GRENADINES, MALTA OR SLOVAK			

HEIGHT: CM	WEIGHT: KG	COLOR OF EYES	SIZE OF CLOTHES*	M	L	SIZE OF SHOES	COLOR OF HAIR
				XL	XXL		

*Właściwe zakreślić

REFERENCES:

NAME OF AGENCY	ADDRESS/TELEPHONE
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SEA SERVICE: Please list sea service for minimum **the last 3 (three) years** (as given at the Seamen's Book)

LP.	NAME OF VESSEL	DECK CREW LIST GT	TYPE OF VESSEL(TUG, CONTAINER, etc)	FLAG	SHIPPING COMPANY	NAME OF THE CREWING AGENCY	PHONE NO TO THE CREWING AGENCY	POSITION	PERIOD OF SERVICE					
		ENGINEERS LIST POWER (KW)	TYPE OF ENGINE (MAK, DEUTZ, MAN, etc)						FROM			TO		
									year	month	day	year	month	day
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														

Please write here in a few words reason of applying for a job in JAN STĘPNIEWSKI I SKA, please inform about the reason of changing the employee and/or give additional information, which may be important or should be known by our Crewing Agency:

Ja niżej podpisany oświadczam, że zamieszczone w niniejszym formularzu dane są prawdziwe i wyrażam zgodę na ich przetwarzanie i przekazywanie ich za granicę dla potrzeb niezbędnych do realizacji procesu rekrutacji (zgodnie z ustawą z dnia 29.08.1997 o ochronie danych osobowych, Dz. U. Nr 133 poz. 883)

Miejscowość/Place:

Dnia/Date:

Imię i nazwisko/Name:

Podpis/ Signature