ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Form No:SMC

I have read the contents of the certificate

Seafarer's Signature

and have been informed of the right to

review. .



SL NO: 07-2022-1229

DR. MD. AYUBUR RAHMAN

M.B.B.S; P.G.T (Medicine)

Taher Chamber
10, Agrabad C/A, Chittagong.
Name & Signature of the practitioner:

SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

SEAFAF	RER INFORMATION:	First MD		ALOM GIR	_	
Name:		FIRST	Middle			
Date of		25-12-1998		.0		
Gender: (Male/Female)						
Mations	ality (1777 Gery DUP)	Passnort/NII) No. (X07 631 2 3			
CDC No	7/33625 Se	aman ID No: OSOC	126+7			
Occupa	tion: Dack/Engine/Catering/	Other (specify)	2			
Father's	s/ Husband's name:	CAMAL HOSS				
Mother	's Name:	ZORINA BE	6019.			
Mailing	address: House No-	Street/Road	No-			
Locality	/Village: LOKKH IR	CHAR PO NA	4NDINA			
P.S	AMALPUR SADAR	strictJAMA	LPUR			
DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:						
I am duly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm						
the followings; 1. Confirmation that identification documents were checked at the point of examination: YES/NO						
1.	Confirmation that identificat	tion documents were ch	ecked at the point of ex	xamination: YES/I	10	
	. Hearing meets the standards in section A-I/9: YES/NO					
	Unaided hearing satisfactory?: YES/NO					
	Visual acuity meets standards in section A-I/9?: YES/NO					
5.						
	Date of last colour vision test: 1 7 JUL 2022					
	Fit for lookout duties?: YES/NO					
7.						
	unfit for service or to render YES/NO	the health of any other	persons on board?:			
8	Any limitations or restriction	s on fitness?: YES/NO				
0.	If YES, specify limita		90 5			
	Duties:	a e		21		
	Location/Vessel:					
	Medical/Other		Fig.		×	
9.	Medical fitness category :	Fit-No restriction	Fit-subject to re	strictions	Unfit	
		17.11	2022			
	10. Date of examination/Issue (DD/MM/YYYY)					
11. Date of expiry (DD/MM/YYYY)1.6JUL 2024						
		. U JUL 2027				