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

Form No:SMC



SL NO: 07-2029-0565.

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

SEAFARER INFORMATION:
Name: Last Hoss AIN First MD Middle I KRAMUL Date of Birth:(DD/MM/YYYY) 22-06-1998
Date of Birth:(DD/MM/YYYY)
Gender: (Male/Female)
Gender: (Male/Female)
CDC No
Occupation: Deck/Engine/Catering/Other (specify) 2ND: OFFICEN - Father's/ Husband's name: MD GoCAM MO STAFA.
Pather's/ Husband's name: MD GOCA MY MO STAFA
Mother's Name: MST SUL TANA PERVIN.
Mailing address: House No- Street/Road No-Locality/Village: PURBO MOJOMPURPO KUSHIIA SAOAR
Locality/Village: YUR 130 MOUD MPUICPO KUS 47/A SADAR
P.S. KUSHTIA SADAR. District KUSHTIA.
DECLARATION OF THE DECOMPTON AND ADDRESS OF THE DECLARATION AN
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
2. Hearing meets the standards in section A-I/9: YES/NO
3. Unaided hearing satisfactory?: YES/NO
4. Visual acuity meets standards in section A-I/9?: YES/NO
5. Colour vision meets standards in section A-I/9?: YES/NO
Date of last colour vision test: 1 0 APR 2024
6. Fit for lookout duties?: YES/NO
7. Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer
unfit for service or to render the health of any other persons on board?:
YES/NO
8. Any limitations or restrictions on fitness?: YES/NO
If YES, specify limitations or restrictions
Duties:
Location/Vessel:
Medical/Other
O Adadisal Stranger
9. Medical fitness category: Fit-No restriction Fit-subject to restrictions Unfit
10. Date of examination/Issue (DD/MM/YYYY)1.0 APR 2024
11. Date of expire (DD/MM/WWW)
11. Date of expiry (DD/MM/YYYY)ggAPR2026
I have read the contents of the certificate
and have been informed of the right to DR. MD. Ayubur Rahman M.B.B.S. P.G.T (Medicine)
review. Taher Chamber, 10. Agrabad C(A, Chittagong) 10. Agrabad C(A, Chitagong)
Stamp Stamp BMDC Reg. No. A-11820 AND APPROVED BY DG Shipping
Seafarer's Signature