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

Form No:SMC



SL NO: 07- 2020-1156

## 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:

| ame: Last HOSSAIN First ABUL KHAER Middle MUHAMMAD 2A         | KIR |
|---|-----|
| ate of Birth:(DD/MM/YYYY)25-11-1977                           |     |
| ender: (Male/Female)MALE                                      |     |
| ationality. BANGLADESHI Passport/NID No: EE0790896            |     |
| DC No   |     |
| ccupation: Deck/Engine/Catering/Other (specify)CHIEF ENGINEER |     |
| ather's/Husband's name: <u>MUHAMMAD</u> ABDUL QUDDUS          |     |
| lother's Name: MRS JAHANARA BEGUM                             |     |
| lailing address: House No- 109 Street/Road No-                |     |
| ocality/Village: BAGHMARA P.O. MYMENSINGH                     |     |
| S MYMENSINGH District MYMENSINGH                              |     |
|   |     |

## **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 ehecked 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 9 OCT 2020
- 6. Fit for lookout duties?: VES/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?:
  - VES/NO

8. Any limitations or restrictions on fitness?: YES/NO

If YES, specify limitations or restrictions

| Duties:<br>Location/Vessel:<br>Medical/Other  |                       |                            | n n<br>Ne n<br>Ne n   |
|---|-----------------------|----------------------------|---|
| 9. Medical fitness category :   | VFit-No restriction   | Fit-subject to restriction | ns Unfit  |
| 10. Date of examination/Issue (I<br>11. Date of expiry (DD/MM/YYY   |                       |                            | rom the date of examination"  |
| I have read the contents of the certificat<br>and have been informed of the right to<br>review.<br>Seafarer's Signature | e<br>Officie<br>Stamp | M 10.                      | M. AYUBUR RAHMAN<br>B.B.S; P.G.T (Medicine)<br>Taher Chamber<br>Agrabad C/A, Chittagong,<br>Senature of the practitioner: |