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

Form No:SMC



SL NO: 07-2024-0553

## **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

Name: Last	d: First	MO	AL	Middle	EMRAN
Date of Birth:(DD/MM/YY	vv) 19	1-10-1991	······································	IVIIIuule	
Gender: (Male/Female) Nationality: BANG! CDC No COT 729	MAC	'E ,		···· 2	
Nationality: BANGL	ADESH MassacrifitA	IID No. AO2	984726.		
CDC No. 901729	O Sooman ID N	0500	05649		
Occupation: Dock/Engine	/Cataring/Other (spec	F/6	/ F		
Occupation: Deck/Engine, Father's/ Husband's name	. MD #9	FIZUR RI	ZHMAN 7	ALUKDER	٧,
Mother's Name:		KUMAN A			•
Mailing address: H Locality/Village: OS MA P.S. GHORA GHA	LANDEM.	Street/Road No-	RMANPIT	2	
DC GHOBA AHA	T. 5:1	P.U	AJOILA	······	
P.S	Distr	rict	307070		
DECLADATION OF THE DE	COCNUZED MEDICAL	DD A CTITIONISD		Verial and	
DECLARATION OF THE RE	COGNIZED MEDICAL	PRACTITIONER:			
I was about a selection to the se					
I am duly authorized by the	ne Department of Shi	ipping, Governme	nt of the People's	Republic of Bang	adesh and confirm
the followings;				/	
1. Confirmation that			d at the point of e	xamination: ŸES/N	0
2. Hearing meets the		A-I/9: YES/NO			
<ol><li>Unaided hearing s</li></ol>					
<ol><li>Visual acuity meet</li></ol>					
<ol><li>Colour vision mee</li></ol>					
Date of la	st colour vision test:	0 6 APR 2024			
<ol><li>Fit for lookout dut</li></ol>	ies?: YES/NO	0 0 1.1			
7. Is the seafarer free	e from any medical co	ondition likely to b	e aggravated by so	ervice at sea or to	render the seafarer
unfit for service or	r to render the health	of any other pers	ons on board?:		
YES/NO					
8. Any limitations or	restrictions on fitness	s?: YES/NO			€ .
	cify limitations or res	•			*
Duties:					
Location/Vessel:					<i>y</i> *
Medical/Other					
ivicalcal, other					
9. Medical fitness ca	togony. E:XI		T' 11		
J. Wiedical littless ca	regory. Fit-No re	estriction	Fit-subject to re-	strictions	Unfit
10 Data of avaminati	/l /DD /AAA /\/\/	NOW DE APP 20	124		<i>i</i> .
10. Date of examination	AND A COOCA	YY)ua <i>h</i> Jlh49			
11. Date of expiry (DD	/IVIIVI/ Y Y Y Y)	APR 2026	"No more than 2	years from the da	ate of examination"
		71111 2020			
I have read the contents of th	ne certificate	Departmentor	A TOTAL STATE		
and have been informed of the		Sol Mapar 6		OR. MD. Ayubu	Rahman
	ic right to	Official	三	M.B.B.S. P.G.	nber.
review.		Stamp6	of esh	O. Agrabad C/A,	A-11820
		Minnh	3///	AND APPRO	ang
Seafarer's Signatu	re	P Coole's Republic	//	Govt. of Bang	pladesn