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

Form No:SMC

بين المنظم ا Seafarer's Signature



SL NO: 07-2024-0271

BMDC Reg. No. A-11820 AND APPROVED BY

*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

		RER INFORMATION:	7015-16-2			
Name: LastALAM First MUHAMMAD Middle JAHAN41R						
Date of Birth:(DD/MM/YYYY) 10-03-1987-						
Gender: (Male/Female)						
Nationality: 109141.40841 Passport/NID No: A07802186 CDC No. C1015868 Seaman ID No: 05000 2605						
CDC No						
Occupation: Deck/Engine/Catering/Other (specify) CHIEF OFFICER						
		's/ Husband's name: SAI r's Name: SAJEDA GEGUM				
IVI	anıng	g address: House No-	1604 Street/Road No- VIP			
Locality/Village: CHAIRMAN PARA P.O BANDARBAN SADAR. P.S. BANDARBAN SADAR District BANDARBAN						
۲.3	······	DI	Strict			
DE	CLA	RATION OF THE RECOGNIZED	MEDICAL DRACTITIONED			
-	CLA	MATION OF THE RECOGNIZED	MILDICAL 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 5 FEB 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				
	9.	Medical fitness category:	Fit-No restriction Fit-subject to restrictions Unfit	7		
e .	10.	Date of examination/Issue (D	DD/MM/YYYY)			
	11. Date of expiry (DD/MM/YYYY)					
I 4 FED ZUZU						
			TO DEDATE:			
		ead the contents of the certificat	DR. MD Ayubur Rahman	i		
	Taber Chamber.					
rev	iew.		Asparabad C/A, Chittagong	3		