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

Form No:SMC



SL NO: 07-2023-1064

## **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

SEAF	ARER INFORMATION:	
Nam	e: LastSINGHA. First KHELENDRA Middle KUMAR of Birth:(DD/MM/YYYY) 23-10-1968	
	y=1	
Gend	der: (Male/Female)	
Natio	der: (Male/Female)	
CDC	No 7/3/022 Seaman ID No: 050005507	
Occu	pation: Deck/Engine/Catering/Other (specify)	
Fath	er's/ Husband's name: THAMBOU SINGHA.	
Moth	ner's Name: CHANDRA MUKHIDEBI.	
Maili	ing address: House No- Street/Road No-	
Loca	lity/Village: NATAPATTAN PO ADAMPUR BAZAR.	
P.S	KAMALGAND District MOULVI BAZAR.	
DECL	ARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:	
*		
I am	duly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm	l
	ollowings;	
	Confirmation that identification documents were checked at the point of examination: YES/NO	
	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	Colour vision meets standards in section A-I/9?: YES/NO	
	Date of last colour vision test: 0 8 AUG 2023	
6		
7	to be approved by service at sea of the reliable tile sealable	•
	unfit for service or to render the health of any other persons on board?:	
	₹ES/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	
	0. Date of examination/Issue (DD/MM/YYYY)0.8AUG. 2023	
1	1. Date of expiry (DD/MM/YYYY)	ii.
	O I MOO FOLJ	

I have read the contents of the certificate and have been informed of the right to review.

Seafarer's Signature



DR. MD. AYUBUR RAHMAN
M.B.B.S; P.G.T (Medicine)
Taher Chamber
10, Agrabad C/A, Chittagong.
Regn. No. A-11820
Name & Signature of the practitioner: