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

Form No:SMC

review.

Seafarer's Signature



SL NO: 07 - 2021- 1135

M.B.B.S, P.G.T (Medicine)
Taher Chamber
10. Agrabad C/A, Chittagong.
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

SEAI	FAF	RER INFORMATION:
Nam	ie:	Last BAREK First MD. ABDUL Middle — Birth:(DD/MM/YYYY) 02-01-1969
Date	of	Birth:(DD/MM/YYYY)02-01-1969
Gen	der	: (Male/Female)MALE ality: BANGLADES HI Passport/NID No: BY 0360321
Nati	ona	ality: BANGLADES HI Passport/NID No: 13Y 0360321
CDC	No	
Occi	ира	tion: Deck/Engine/Catering/Other (specify)
		s/ Husband's name:M.D.:D.ALIL UDDIN HOWLADER
Mot	her	's Name: MRS HIZRA BEGUM
Mail	ing	
Loca	lity	address: House No- Street/Road No- /Village: NOROSHING HPUR P.O. NOROSHING HPUR
P.S		H12LA District BARISAL
*		
DEC	LAF	RATION OF THE RECOGNIZED MEDICAL PRACTITIONER:
		ly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm
		owings;
-		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
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: 2 0 SEP 2021 Fit for lookout duties?: VES/NO
		The for football duties. Y 25/140
. 7	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	3.	Any limitations or restrictions on fitness?: YES/N δ
		If YES, specify limitations or restrictions
	·	Duties:
		Location/Vessel:
		Medical/Other
9	€.	Medical fitness category: Fit-No restriction Fit-subject to restrictions Unfit
		0.0.050,0004
1	lO.	Date of examination/Issue (DD/MM/YYYY)2.0SEP2021
1	1.	Date of expiry (DD/MM/YYYY)"No more than 2 years from the date of examination"
		1 9 SEP 2023
		ad the contents of the certificate
and h	ave	been informed of the right to OR. M. AYUBUR RAHMAN