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

Form No:SMC

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

Seafarer's Signature

review.



SL NO: 07-2022-1032

DR. MD. AYUBUR RAHMAN 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

SEAFA	RER INFORMATION:
Name:	
Date o	Last
Gende	r: (Male/Female)
Nation	ality BANGLADESHI Passport/NID No: EA 0619105
CDC No	7/29916 Seaman ID No: 050003002
Occupa	ality BANGLADESHI Passport/NID No: EA 0619105  Seaman ID No: 050003002  Stion: Deck/Engine/Catering/Other (specify) BOSUNT
	s/ Husband's name:
	r's Name: MOST LOTFER NACHA.
Mailing	address: House No- Street/Road No-
Locality	/Village: CHARDULA! PO DULA!
P.S	I/Village: CHARDULA! SUJANAGAR District PABNA
DECLA	RATION OF THE RECOGNIZED MEDICAL PRACTITIONER:
	The state of the s
I am dı	lly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm
the foll	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
	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 2 JUN 2022
6.	Fit for lookout duties?: YES/NO
/.	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
	4.0. 1111. 2000
10.	Date of examination/Issue (DD/MM/YYYY)1 2 JUN 2022
11.	Date of expiry (DD/MM/YYYY)"No more than 2 years from the date of examination"
	1 1 JUN 2024

Official

Stamp