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: 07-2021-0406

M.B.B.S; P.G.T (Medicine)

Taher Chamber

10, Agrabad C/A, Chittagong,
Regn. No. A-11820

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

SEAFARER INFORMATION: Name: Last. CDD1 N First. MOHAMMAD Middle Sc (TAIN Date of Birth:(DD/MM/YYYY) 25-11-1972	
Date of Birth: $(DD/MM/YYYY)$ $25-1/-1972$	
Gender: (Male/Female)	
Nationality BANGLADESHI Passport/NID No. BR 0592604.	
CDC No7/309/2 Seaman ID No: 0500 08504	
Occupation: Deck/Engine/Catering/Other (specify)	
Father's/ Husband's name: MOHAMM AD MAZOM ALI	
Mother's Name: SUR TO MAN.	
Mailing address: House No- Street/Road No-	
Locality/Village: BENGURA. P.O. DARCOTIA.	
Mailing address: House No- Street/Road No-Locality/Village: BENGURA P.O. ARKOTA. P.S. GUTURIA District MANIKGONJ,	
DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:	
I am duly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm	1
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: 2 5 MAR 2021	
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	r
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	
10. Date of examination/Issue (DD/MM/YYYY)2.5MAR2021	
11. Date of expiry (DD/MM/YYYY) "No more than 2 years from the date of examination"	,
2 4 MAR 2023	
AND THE STATE OF T	
have read the contents of the certificate	
and have been informed of the right to DR. MD. AYUBUR RAHMAN	