## 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 - 2021 - 1145

DR. M. AYUBUR RAHMAN M.B.B.S; P.G.T (Medicine) Taher Chamber

¥0. 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

SEAFAF	RER INFORMATION:
Name:	Last KHAN First MONIR U 22AMAN Middle
Gender	: (Male/Female)MALE
Nationa	ality: BANGLADES 41 Passport/NID No: EF 0467770
CDC No	T/_ 29922 Seaman ID No: 05,000 7850
Occupa	ality: RANGLADES 41 Passport/NID No: EF 046 7770 T/ 29922 Seaman ID No: 05000 7850 String (Specify) SM - 11
ather's	s/ Husband's name:MUNSEF ALI KHAN
Mother	's Name: AKLIMA AKTER
	address: House No- Street/Road No-
Locality	/Village: GAMARIA PO DEWANGONG
P.S.DE	NANGONG District JAMALPUR
DECLAF	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
	Visual acuity meets standards in section A-I/9?: YES/NO
5.	Colour vision meets standards in section A-I/9? X/ES/NO
	Date of last colour vision test: 2 0 SEP 2021  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
5	2 0 SED 2021
10.	Date of examination/Issue (DD/MM/YYYY) 2.0. SEP 2021
11.	Date of expiry (DD/MM/YYYY)
	1 9 SEP 2023