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

Form No:SMC

eafarer's Signature



SL NO: 07-2021-0205.

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

SEAFA	ER INFORMATION:	
Name:	ast PAROUGE, First MO77 MONEY Middle	
Date o	Birth: (DD/MM/YYYY)29-07-1979,	
Gende	(Male/Female)	
Nation	lity: BANGIA DESHI Passport/NID No: BX 0632746	
CDC No	<u> </u>	
Occupa	ion: Deck/Engine/Catering/Other (specify)	
Father'	ER INFORMATION: ast FARUQUE. First MOHMMED Middle Birth:(DD/MM/YYYY) 29-07-1979, (Male/Female) MALE. lity: BANGIA DESH! Passport/NID No: BX 0632946. BDS 0492RB Seaman ID No: ion: Deck/Engine/Catering/Other (specify) FITTER. / Husband's name: MOHRMMED SHAHALAM,	
Mothe	s Name: MUR JAHAN.	
Mailing	address: House No- Street/Road No- Village: KAIBAIYLLA DHAM P.O. AXBBZ SFIAH	
P.S	KBARSHAH District CHATTOBRAM	
DECLA	ATION OF THE RECOGNIZED MEDICAL PRACTITIONER:	
	y authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm	
the fol		
	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: 2 2 FEB 2021	
6.	Fit for lookout duties?: YES/NO	
7.	s 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	
	Tit-subject to restrictions Offit	
10.	Date of examination/Issue (DD/MM/YYYY) <mark>22F.E.B2021</mark>	
	Date of expiry (DD/MM/YYYY) "No more than 2 years from the date of examination"	
	2 1 FEB 2023	
. 1	W889W	
	d the contents of the certificate	
	been informed of the right to DR. MD. AYUBUR RAHMAN M.B.S.: P.G.T (Medicine)	
review	Taher Chamber 10, Agrabad C/A, Chittagong.	
	10, Agrabao JA, 11920	