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

Form No:SMC

Seafarer's Signature



SLNO: 07- 2022 - 1506

\* 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
Date of Birth:(DD/MM/YYYY)
Gender: (Male/Female)MALE
Nationality: BANGICADESHI Passport/NID No: EG 0887627
Gender: (Male/Female)
CDC NoT./33681Seaman ID No:
Father's/ Husband's name:M.DM02 N U
Mother's Name: MST SALMA
Mailing address: House No- Street/Road No-
Locality/Village: DIGOR PO 24HIDGANJ P.S. GHATAIL District TANGAIL
P.S. GHATAIL District TANGAIL
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
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 0 SEP 2022
o. The followood duties: WES/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?:
√ES/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: Wit-No restriction   Fit-subject to restrictions   Unfit
10 2 CED 2022
10. Date of examination/Issue (DD/MM/YYYY).2USEP2UZZ
11. Date of expiry (DD/MM/YYYY)"No more than 2 years from the date of examination"
1 9 SEP 2024
I have read the contests of the contificate
I have read the contents of the certificate and have been informed of the right to  DR. M. AYUBUR RAHMAN
and have been informed of the right to  Preview.  DR. M. AYUBUR RAHMAN  M.B.B.S. P.G. T (Medicine)
Sabbir Taher Chamber