	NAAF MARINE SERVICES		NMS/F-04	Date	1 July 2012
	TITLE: - PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE			Issue No	00
				Page No	1 of 6

**CONFIDENTIAL FORM**

SURNAME <b>MINTO</b>	GIVEN NAME(S) <b>MOHAMMAD SHAHNAWAZ</b>	
DATE OF BIRTH MONTH <b>07</b> DAY <b>29</b> YEAR <b>1982</b>	PLACE OF BIRTH CITY <b>CHATTGRAM</b> COUNTRY <b>B'DESH</b>	SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
EXAMINATION FOR DUTY AS: MASTER <input type="checkbox"/> DECK OFFICER <input type="checkbox"/> ENGINEERING OFFICER <input type="checkbox"/> RATING <input checked="" type="checkbox"/> OTHERS (RANK: <b>(R/G)</b> ) <input type="checkbox"/>	MAILING ADDRESS OF APPLICANT: <b>SOUTH MIDDLE HALISHAHAR, WARD NO-38, CHITTAGONG BANDAR MAIN POST OFFICE, BANDAR, CHITTAGONG</b>	

**MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE**

HEIGHT <b>5'10"</b>	WEIGHT <b>90KG</b>	BLOOD PRESSURE <b>130/80MM/Hg</b>	PULSE <b>88/min</b>	RESPIRATION <b>16/min</b>	GENERAL APPEARANCE <b>GOOD</b>
VISION: WITHOUT GLASSES RIGHT EYE <b>6/6</b> LEFT EYE <b>6/6</b> WITH GLASSES <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		HEARING: RT. EAR <b>NORMAL</b> LEFT EAR <b>NORMAL</b>			

COLOR TEST TYPE: BOOK ☒ LANTERN ☒ CHECK IF COLOR TEST IS NORMAL - YELLOW ☒ RED ☒ GREEN ☒ BLUE ☒

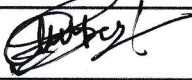
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARDS? Yes ☐ No ☒

HEAD AND NECK <b>NORMAL</b>	HEART (CARDIOVASCULAR) <b>NORMAL</b>
LUNGS <b>CLEAR</b>	SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? <b>YES</b>

EXTREMITIES:  
UPPER **NORMAL** LOWER **NORMAL**

IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? Yes ☐ No ☒

IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? Yes ☐ No ☒

 SIGNATURE OF APPLICANT	<b>23 MAY 2023</b> DATE
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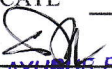
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: **MOHAMMAD SHAHNAWAZ MINTO**  
**Fit For Duty on Board Ship** NAME OF APPLICANT

THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE (OR VIRUSES FOR COOKS): Yes ☒ No ☐

SEAFARER IS FOUND TO BE ☒ FIT / ☐ NOT FIT FOR DUTY AS A ☐ MASTER / ☐ DECK OFFICER / ☐ ENGINEERING OFFICER / ☒ RATING / ☐ CHIEF COOK / ☐ COOK / ☒ WITHOUT ANY RESTRICTIONS / ☐ WITH THE FOLLOWING RESTRICTIONS:

NAME AND DEGREE OF PHYSICIAN	<b>DR. MD. Ayubur Rahman</b>
ADDRESS	<b>M.B.B.S. P.G.T (Medicine) Taher Chamber, 10, Agrabad C/A, Chittagong</b>
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY	<b>BMDC Reg No: A-11820</b>
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	<b>AND APPROVED BY DG Shipping Govt. of Bangladesh</b>
SIGNATURE OF PHYSICIAN	<b>23 MAY 2023</b> DATE

  
**DR. MD. AYUBUR RAHMAN**  
 M.B.B.S; P.G.T (Medicine)  
 Taher Chamber  
 10, Agrabad C/A, Chittagong  
 Reg. No. A-11820  
 This certificate is in compliance with the requirements  
 of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73, STCW I 9/A)

**(CONTROLLED DOCUMENT)**

Quality Manual: Naaf Marine Services, Chittagong, Bangladesh: July 2012