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

Form No:SMC



SL NO: 07-2022-1295

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 SOL 9/MAN First MOHAMMED Middle Middle Date of Birth: (DD/MM/YYYY) 12-05-1969. Gender: (Male/Female) MALE. Nationality: BANGLADE SHI Passport/NID No: EBO3/3340 CDC No. 7/33604 Seaman ID No: 0500/2609 Occupation: Deck/Engine/Catering/Other (specify) MIDER Father's/ Husband's name: MOHAMMED THANDA MEAH
Date of Birth: $(DD/MM/YYYY)$ $\frac{12-05-1969}{}$
Gender: (Male/Female)
Nationality: BANGLADE SHI Passport/NID No: 6130 33340
CDC No
Occupation: Deck/Engine/Catering/Other (specify)
Father's/ Husband's name: MOHAMMED THANDA MEAH
Mother's Name: Mosamina / SACAMA ICHAID
Mailing address: House No- Street/Road No-Locality/Village: HALISHAHAR: P.O. ANANDA BAZAR -
Locality/Village: HALLSHAHAR P.O. ANANDA BAZAR.
P.S. BANDAR District CHATTOGRAM
DECLARATION OF THE PERCONNERS ASSESSED.
DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:
Lam duly authorized by the Department of Chinains Community of the Department of Chinains Community
I am duly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm the followings;
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 3 JUL 2022
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
unfit for service or to render the health of any other persons on board?: VES/NO
8. Any limitations or restrictions on fitness?: YES/NO
If YES, specify limitations or restrictions
Duties:
Location/Vessel:
Medical/Other
medical other
9. Medical fitness category: Fit-No restriction Fit-subject to restrictions Unfit
9. Medical fitness category: Fit-No restriction Fit-subject to restrictions Unfit
10. Date of examination/Issue (DD/MM/YYYY) 2 3 JUL 2022
11 Date of evening (DD (AARA (AAAA)
2 2 JUL 2024
I have read the contents of the certificate
and have been informed of the right to
review. DR. MD. AYUBUR RAHMAN M.B.B.S; P.G.T (Medicine)
Taher Chamber 10, Agrabad C/A, Chittagong.
Seafarer's Signature Name & Signature of the practitioner: