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

ignature

and have been informed of the right to

Seafarer/s

review.*



SL NO: 07-2023-1135.

DR. MD. AYUBUR RAHMAN

M.B.B.S; P.G.T (Medicine)

Taher Chamber

10, 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

Name:	Last ALAM	First 7 20-01	18HAMME	DMiddle	JAHAN GI	R
	of Birth:(DD/MM/YYYY)	20-01	-1978			
	r: (Male/Female)	MALE.				
Nation	ality BANGILADE	SHI Passport /N	IID No: A	7899611		
CDC N	0 0/0/45/2	Seaman ID No	0. 050	007672 -		
Occum	ation: Deck/Engine/Cate	ing/Other (spec	rify) M	497ER,		
Father	er: (Måle/Female) nality: BAN GAADE o	MOMAN	MED WE	IRUL ALAN	ï·	
Mothe	er's Name:	2661101	NISSA B	EGOM.		
Mailin	g address. House	No-	Stroot/Pond N	0		
Localit	y/Village: MASIRA PANEHLISH	BAD	P O	POLITECH	NIE	
P.S	PANEHLISH	District	CHA	TTOGRAM.		
				*		
DECLA	RATION OF THE RECOGN	IIZED MEDICAL	PRACTITIONER	20 20		
						-
I am d	uly authorized by the De	partment of Shi	ipping, Governi	nent of the People's	Republic of Ban	gladesh and confirn
	lowings;			•		_
1.	Confirmation that ident	ification docum	ents were chec	ked at the point of e	xamination: YES/	NO
2.	Hearing meets the standards in section A-I/9: YES/NO					
	Unaided hearing satisfactory?: YES/NO					
4.	Visual acuity meets standards in section A-I/9?: YES/NO					
5.	Colour vision meets sta	ndards in sectio	n A-I/9?: YES/N	0 .		
	Date of last cold	our vision test: 💈	2 1 AUG 2023			i i
6.	Fit for lookout duties?:	YES/NO				
7.	7. Is the seafarer free from any medical condition likely to be aggravated by service at sea or to rende					
	unfit for service or to re					
	YES/NO					
8.	Any limitations or restri	ctions on fitness	s?: YES/NO			
	If YES, specify li	mitations or res	trictions			
	Duties:		3		9	
	Location/Vessel:					
-	Medical/Other				į.	
9.	Medical fitness categor	v: Fit-No.re	estriction	Fit-subject to re	etrictions	Unfit
					Strictions	
10.	Date of examination/Iss	ue (DD/MM/YY	YY) 21 AUG	2023		
11.	Date of expiry (DD/MM	/YYYY)	-AHE2035	"No more than 2	2 years from the	date of examination
		2 0	AUG ZUZJ		- 1	