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

Form No:SMC



SL NO: 07 - 2022 - 0046

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	RER	INF	OR	MA	TI	ON	:

Name: Last. ISLAM First NAGRUL Middle	
Date of Birth;(DD/MM/YYYY)01-06 - 1979	.0
Conden (MKIa/Famala) MALE	
Nationality: BANGLADESHI Passport/NID No: BW 0165669	
CDC NoSeaman ID No:	
Occupation: Deck/Engine/Catering/Other (specify)	
Father's/Husband's name:N.U.R.VL AMIN	
Mother's Name: THAMINA	
Mailing address: House No- Street/Road No-	
Locality/Village: WEST CHARDARBESH P.O. CHOWDHURY MARKET	
P.S. SONAGAJI District FENI	

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? XES/NO
- Date of last colour vision test: 3 JAN 2022
- 6. Fit for lookout duties?: VES/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
- Any limitations or restrictions on fitness?: YES/N 8. If YES specify limitations or restrictions

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	Duties: Location/Vessel: Medical/Other					ан Сан Сан Сан Сан Сан Сан Сан Сан Сан С
9.	Medical fitness category :	V it-No res	striction	Fit-subject	et to restrictions	Unfit
	Date of examination/Issue (D Date of expiry (DD/MM/YYY)	()			e than 2 years from t	he date of examination"
	ad the contents of the certificat been informed of the right to NALRUL GSN Séafarer's Signature	e	All	,	M.B.B.S; I Tahe 10, Agrabad	UBUR RAHMAN P.G.T (Medicine) or Chamber d C/A, Chittagong. Ye of the practitioner: