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

Form Ntx SMC



SL NO 01/2024/144

SEAFARER MEDICAL CERTIFCATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping fficers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International onvention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Consention, 2006.

onvention on Standards of Training Certificate an Maritime Labour Convention, 2006	d Watch keeping for S	eafarers, 1978	as amended (STCW 78) and Regu	namm.
SEAFARER INFORMATION:	publication-rountiererolates) poules in committee and the committee of the			
Name: Last #9055AIN	First	O ABID.	, Middle:	
Date of Birth:(DD/MM/YYYY) Q1Q	CT 2002			
Gender: (Male/Female) MALE Nationality: BANGLA DESHI				
Nationality: BANGLADESHI	Passport/NID N	o: <i>Bl</i>	10262547	
ODO N	Seaman ID No:			
Operation: Dock/Engine/Catering/Other (specify)	D/CA	DE)		
Father's/ Husband's name: MD M	WAHARUL	15LAM		
65111/0 05	(.IIM			
A 4 - 22	House No		Street/Road No	
GOAL HAT I	P O	<u> 1819,97191</u> 9	HNUMPURTHER	
P.S. JHIKARGACHHA.	District	JASHO	RE	
DECLARATION OF THE RECOGNIZED MEDIC	AL PRACTITIONER:			
I am duly authorized by the Department of Shippi	ng, Government of th	ie people's Re	epublic of Bangladesh and	
F the followings:			ν	
 Confirmation that identification document 	s were checked at th	e point of exa	mination: YES/NO	
2 Hearing meets the standars in section A	1-1/9: YES/NO			
2 Unaided hearing satisfactory?:YES/NO	\checkmark			
Visual acuity meets standards in section	A-1/9/: YES/NO			
5. Colour vision meets standards in section	A- 1/8 (YES).NO			
Date of last colour vision test:	JAN ZUZ4			
6. Fit for lookout duties?:YES/NO7. Is the seafarer free from any medical cor	ndition likely to be ag	gravated by se	ervice at sea or to render the se	eafarer
7. Is the seafarer free from any medical columnit for service or to render the health of	any other persons of	n board?:		
unfit for service or to relider the health of YES/NO	arry outer persons			
" " " and trictions on fitness?	YES/NO			
8. Any limitations or restrictions of fittless: If YES, specify limitations or r	estrictions			
Duties:				
Location/Vassel:				
Medical/Other		Cit	-subject to restrictions	Unfit
9. Medical fitness categor Fit-No res	triction		-Subject to restrictions	
(CDD/MM/VYYY	18 JA	N 2024		
10. Date of examination/Issue (DD/MM/YYYY	4 7 1/	N 2026"	No more than 2 years from the	date of examination
1. Date of expiry (DD/MM/YYYY)		M KUKU	No more than 2 years from the	100
	RAFI	·	1 a PRIS	V 4/
I have read the contents of the certificate	Officia		W Reffice	Misland
and have been informed of the right to	V ≱ Stam		Dr. Md. Tany	Part-11
review. outle hossain	NE BELL	2/*/	Name & Signature of	re practitioner:
Orong 1003>0001	116 4	251	Approved No: A	12557

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Name & Signature of the practitioner:

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onvention on Standards of Training Certificate and Maritime Labour Convention, 2006	Watch keeping for Seafarers, 1978 as amended (STCW 78) and Regulation 1.2 of the
SEAFARER INFORMATION:	
Name: Last #055AIN	First MD AGID Middle:
Date of Birth:(DD/MM/YYYY)	7 2002
Gender: (Male/Female) MALE	
Nationality: BANGLADESHI	Passport/NID No: <i>B0026254</i> 7
CDC No:	Seaman ID No:
Ocupation: Deck/Engine/Catering/Other (specify)	D/ CADET
Father's/ Husband's name: MD Mu	OZAHARUL ISLAM
LELINO DEL	.IIM _
Mailing address:	House No Street/Road No
Locality Willage: GOALHAT 1	P.O. GONGANANDAPOR - +420
P.S. JHIKARGACHHA	District
DECLARATION OF THE RECOGNIZED MEDICA	
confirm the followings; 1. Confirmation that identification documents 2. Hearing meets the standars in section A- 3. Unaided hearing satisfactory?:YES/NO 4. Visual acuity meets standards in section A- 5. Colour vision meets standards in section A- Date of last colour vision test:	A-1/9?:YES/NO A- 1/8?YES/.NO JAN 2024 dition likely to be aggravated by service at sea or to render the seafarer any other persons on board?: YES/NO
Location/Vassel: Medical/Other	
9. Medical fitness category Fit-No restr	
10. Date of examination/Issue (DD/MM/YYYY) 1. Date of expiry (DD/MM/YYYY)	18 JAN 2024 1-7-JAN 2026 "No more than 2 years from the date of examination of the control of t
I have read the contents of the certificate and have been informed of the right to	Official Dr. Md. Ruffical Island Dr. Md. Ruffical Island

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review.