

**APPLICATION TO BE EXAMINED FOR A  
CERTIFICATE OF COMPETENCY AS 1<sup>ST</sup> CLASS / 2<sup>ND</sup> CLASS MASTER / ENGINE DRIVER /  
SERANG OF AN INLAND MECHANICALLY PROPELLED VESSEL**

**A. Name of Applicant**

Name	Surname	Permanent Address
Date and Place of Birth		

**B. Particulars of all previous Certificates (If any)**

Title	Date of Issue

**C. Certificate Now Required (Tick as required)**

1 <sup>st</sup> Class Master	<input type="checkbox"/>	2 <sup>nd</sup> Class Master	<input type="checkbox"/>	Engine Driver	<input type="checkbox"/>	Serang	<input type="checkbox"/>
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D. If the applicant has failed in a previous examination for the certificate now Required, he must here state when and where. If he has not failed, he must state so in writing across the division.

Day	Month	Year	Examination which Failed

**E. Declaration to be made by Applicant**

I do hereby declare that the particulars contained in Division (A), (B), (C), (D) and (F) of this form are correct and true to the best of my knowledge and belief, and that the papers enumerated in Division (F) and sent with the form are true and genuine documents, given and signed by persons whose name appear on them. I further declare that the statement (F) contains a true and correct account of the whole of my service without exception.

And I make declaration conscientiously believing the same to be true.

Signature of Applicant

**Principal Officer**

Dated \_\_\_\_\_

**Mercantile Marine Department, Karachi**

*(Note: Any person who makes, procures to be made or assist in making, any false representation for the purpose of obtaining for himself or any other person a certificate, either of Competency or Service, is for each offence liable to be punished as for a misdemeanor)*

**F. List of Testimonials & Statements of Service on Shore and at Sea**

Vessel Details				Service Details								
Ship Name	HP	Official No	POR	Capacity	Start Date	End Date	Y	M	D	Testimonials Attached	Remarks	Initial
Total Sea Service for which Testimonials are attached												

**G. Certificate of Examiner**

Examined On		Result		Signature of Examiner
Date	Place	Passed	Failed	

**Principal Officer**

Dated \_\_\_\_\_

**Mercantile Marine Department, Karachi**