DECK – II/5 (REVALIDATION) – CHECK LIST

REVALIDATION OF WATCH KEEPING STCW II/5 CERTIFICATE

(For candidates willing to get a new certificate five years after the issuance date of the Certificate of Proficiency)

I. Particulars of Candidate

Name in full (block letter)	
Father's Name (block letter)	
Date of Birth with Place	
CDC/SSB No.	

II. Requirements:

S.N		Dated	
1	Medical Fitness Certificate *(from an Approved Doctor)* OR SSB Medical Examination		
2	Medical Fitness "Hearing" Port Health Department		
3	An eye sight test certificate for Visual & Color vision from MMD		
4	Bridge-watchkeeping certificates *(if available)*	Yes	No
5	At least 12 months approved seagoing service onboard vessel of 500 GT or more during last 5 years in any deck capacity	Months: _____ Days: _____	
6	Duly completed Sea Service Certificate (Deck) verification form *(for online sign on/off candidates only)*		
7	If 12 months seagoing service requirement is not fulfilled. *(Revalidation of Certificate subject to passing STCW II/5 Oral Examination)*		
8	Basic course valid for at least one year on the date of application.	Yes	No
9	Basic courses verified from the certificate issuing institute	Yes	No

10	Personal survival techniques		11	Fire prevention and fire fighting	
12	Elementary first aid		13	Personal safety and social responsibilities	
14	Proficiency in survival craft and rescue boats other than fast rescue boats		15	Approved Training of Efficient Deck Hand (only required if reappearing for Examination)	

III. Fees

Amount (Rs)	Receipts No.	Date	Signature

IV. Attempts / Result

Attempt No.	Result	Date	Signature of Examiner

V. Certificate No. / Date

Certificate No.	Date