HARBOUR VIEW MARITIME TRAINING INSTITUTE COURSE APPLICATION FORM

PERSONAL DETAILS		
Surname *(Last/Family Name)*		**photo**
Given Names *(First and Middle Names)*		
D. O. B *(dd/mm/yyyy)*		
Place of Birth *(County)*		
Passport / I.D Card Number		
CDC Number		
Phone Number		
Email		

FULL COURSE APPLIED FOR (PLEASE TICK IN THE BOX)

	BASIC SAFETY COURSES STCW AS AMENDED		
1	Personal Survival Techniques (PST)	STCW REG.VI/1-1	☐
2	Fire Prevention and Fire-Fighting (FPFF)	STCW REG.VI/1-2	☐
3	Elementary First Aid (EFA)	STCW REG.VI/1-3	☐
4	Personal Safety and Social Responsibilities (PSSR)	STCW REG.VI/1-4	☐

	SECURITY COURSES		
5	Security Awareness Training (SAT)	STCW REG.VI/6-1	☐
6	Seafarers with Designated Security Duties (DSD)	STCW REG.VI/6-2	☐
7	Ship Security Officer (SSO)	STCW REG.VI/5	☐
8	Company Security Officer (CSO)	ISPS Code, MSC/Circ.1154	☐
9	Passenger Safety, Ship Cargo Safety and Hull Integrity	STCW REG.A-V/2-5	☐

10	Passenger Ship Safety Training	STCW REG A-V2-2	☐
11	Proficiency in Fast Rescue Boats	STCW REG A-V1/2-2	☐
12	Proficiency in Survival Craft and Rescue Boats	STCW REG A-V1/2-1-1	☐
	MEDICAL FIRST COURSES		
13	Medical First Aid (MFA)	STCW REG.VI/4	☐
14	Medical Care (MC)	STCW REG.VI/4	☐
	TANKER COURSES		
15	Basic Training for Oil and Chemical Tanker Cargo Operations	STCW REG. V/1-1	☐
16	Basic Training for Liquefied Gas Tanker Cargo Operations	STCW REG. V/1-2	☐
17	Advance Training for Oil Tanker Cargo Operations	STCW REG. V/1-1	☐
18	Dangerous Hazardous and Harmful Cargoes		
19	Advance Training for Chemical Tanker Cargo Operations	STCW REG. V/1-1	☐
	ADVANCED COURSES		
20	Electronic Chart Display and Information System (ECDIS) Operational Level	STCW REG. II/1	☐
21	Electronic Chart Display and Information System (ECDIS) Management Level	STCW REG. II/2	☐
22	Electronic Navigational Aids (ENA)	STCW REG A-11/1	☐
23	Bridge Resource Management (BRM) Operational Level	STCW REG. II/1	☐
24	Bridge Resource Management (BRM) Management Level	STCW REG. II/2	☐
25	ARPA Operational	STCW REG. II/1	☐
26	ARPA Management	STCW REG. II/2	☐
27	Navigation Aids, Equipment and Simulator Training (NAEST) - Operational Level	STCW REG. II/1	☐
28	Navigation Aids, Equipment and Simulator Training (NAEST) - Management Level	STCW REG. II/2	☐

29	Engine Room Resource Management (ERM) Operational Level	STCW REG. III/1	☐
30	Engine Room Resource Management (ERM) Management Level	STCW REG. III/2	☐
31	High Voltage Operational Level	STCW REG. III/1	☐
32	High Voltage Management Level	STCW REG. III/2	☐
33	Rating Forming Part of A Navigation Watch	STCW REG. II/4	☐
34	Crises Management and Human Behaviour	STCW REG A-V/2-4	☐
35	Crowd Management	STCW REG A-V/2-1	☐
36	Rating Deck and Engine	STCW V/1-1-2	☐
37	AB Deck and Engine	STCW REG A-II/5/III/5	☐
38	Refresher Deck Rating	STCW II/5	☐
39	Refresher Engine Room Ratings	STCW REG III/4	☐
40	Refresher and Upgrading Officers	STCW REG A-I/11	☐
41	Able Seafarer Deck	STCW REG. II/5	☐
42	Rating forming part of an Engineering Watch	STCW REG. III/4	☐
43	Able Seafarer Engine	STCW REG. III/5	☐

	GMDSS AND RADIO COURSES		
44	GMDSS General Operator Course (GOC)	STCW A-II/1	☐
45	GMDSS Restricted Operator Course (ROC)	STCW A-II/3	☐

	OTHER COURSES		
46	Training Course for Instructors	STCW REG. I/6	☐
47	Train the Simulator Trainer & Assessor	STCW REG. I/12	☐
	ANY OTHER COURSE NOT IN THE LIST ABOVE		
48			☐
49			☐

DECLARATION

I, …………………………………………………………………………declare that the information given in this application form is correct. I further certify that I have read, understood and agreed to comply with the terms stipulated herein.

Signature of Applicant   Date

Documentary Evidence

The following documents must be submitted with the application form where applicable, a copy of CDC detailing sea service experience acquired should only be submitted for advanced STCW courses

SN Item   Enclosed (if Applicable)

1 Copy of Passport/National ID   ☐
2 Valid Seafarers Medical Certificate   ☐
3 Relevant Sea Time Experience   ☐
4 Copy of CDC (Seaman Book)   ☐
5 Valid Insurance Cover   ☐

FOR OFFICIAL USE

Approved By

Signature   Date

_____   _____

Verified By

Signature   Date

_____   _____