

**Commonwealth of Dominica**



**Office of the Maritime Administrator**

**TO:** CURRENT AND PROSPECTIVE FLAG STATE ASSESSORS PROVIDING SERVICES ON BEHALF OF THE COMMONWEALTH OF DOMINICA

**SUBJECT:** MINIMUM REQUIREMENTS AND STANDARDS FOR APPOINTMENT OR RENEWAL AS A FLAG STATE ASSESSOR

**PURPOSE:** This Policy Letter provides guidance and information relating to the minimum requirements for renewal or application for appointment as a Flag State Assessor on behalf of the Commonwealth of Dominica Maritime Administration.

**APPLICABILITY:** This Policy Letter applies to current and prospective Flag State Assessors.

**General**

The Commonwealth of Dominica Maritime Administration has developed and implemented a Flag State Assessment and Examination Program for the issuance of Original Certificates of Proficiency or Certificates of Competency.

Flag State Assessors are appointed in accordance with their training, experience, qualifications, and expertise. This Policy Letter is intended to inform all assessors about the requirements for the process of renewal, evaluation and approval as a Flag State Assessor. Set out below are the minimum standards for appointment as a Flag State Assessor depending on the level of appointment.

Any individual interested in appointment as a Flag State Assessor is invited to review this information and complete the appended application and submit all necessary documents and forms to the Mariner Licensing and Certification Department at the Office of Maritime Affairs.

**Minimum Requirements**

A Designated Assessor is defined in CDP-302 as “A person who has been trained or instructed in techniques of training or *assessment* and is otherwise qualified to administer performance assessment procedures.”

A Designated Assessor assesses the ability of an individual to perform a task, duty or responsibility properly, using established criteria and professional judgment in determining whether an acceptable level of proficiency and competence has been demonstrated. A Designated Assessor must always personally witness the performance of the task, duty or responsibility by the person whose competence is to be assessed. This performance is called a “task” which is defined in CDP-302 as meaning “A single, observable work assignment that is independent of other actions and supports successful job performance. A task must be observable, be a complete work assignment, have a specific beginning and end, and be measurable by its intended product or outcome.” For purposes of the assessment of competence of a skill or ability required for an STCW Certificate of Proficiency or Certificate of Competency, the assessment criteria are set out in the standards of competence contained in the tables of the STCW Code.

Those individuals seeking appointed as a Designated Assessor must have documentary evidence to establish the following:

1. Have experience, training or been instructed in assessment techniques;
2. Are qualified in the task for which the assessment is being conducted;
3. Hold the level of license, endorsement, or other professional credential required for the level of assessment to be conducted as indicated in Appendix B;
4. Evidence of 36 weeks of experience as an instructor in a maritime field;
5. Evidence of operational experience relevant to the field of maritime training in which appointment as a Designated Assessor is being sought. Appointment will be limited to the field of experience;
6. Copy of valid passport;
7. One color passport style photo (clear scanned image of adequate quality will be accepted for electronically submitted applications);
8. Scanned image of applications signature of adequate quality;
9. Copy of recent CV/Resume; and
10. Copies of any/all training certificates that may be relevant in evaluating qualifications.

Documentary evidence of training or instruction shall be in the form of a certificate of successful completion of the STCW Assessor’s Course (<https://northeastmaritimeonline.com/stcw-assessors-course-stcw/>) provided by Dominica approved training provider Northeast Maritime Institute. STCW Assessor’s Course is based on IMO model course 6.09 which covers the following areas:

- Identification of training needs;
- Learning processes;
- Course design;
- Teaching methods;
- Recognition of individual capacity;
- Identification of performance standards;
- Presentation techniques and use of media;
- Assessment of knowledge;
- Assessment of skills and abilities;

- Measurement of progress toward training objectives and of adequate performance;
- Favorable and unfavorable conditions for learning and assessment;
- The role of incentive and motivation in learning;
- Use of feedback for performance improvement; and
- Course evaluation.

Flag State Assessor Agreements are valid for a period of five years with the option to renew the agreement. The Agreement and relevant Letter of Appointment may be revoked at any time if an investigation determines fraudulence, falsification or abuse of assessment(s) among other causes.

Designated Assessors may renew their Agreement by submitting evidence of their most recent experience as an Assessor as well as an evaluation conducted by the Head Office of the continued ability to assess the competence of seafarers in the appropriate field(s) of maritime training.

**Note:** In the event an applicant is not eligible, he or she may reapply after a period of one (1) year from the initial date of application unless legal and/or other permanent reasons for denial are provided.

**Any questions can be directed to:**

**Director of Mariner Licensing and Certification**  
Tel: + 1 508 992 7170 ext. 309  
e-mail: [mariner@dominica-registry.com](mailto:mariner@dominica-registry.com)

**-End-**

**Appendix A**  
**FLAG STATE ASSESSOR QUALIFICATIONS**

| Level of Proficiency/Competence Being Assessed | Minimum Qualification of Assessor                                    |
|------------------------------------------------|----------------------------------------------------------------------|
| <b>DECK</b>                                    |                                                                      |
| (II/1) OICNW >500 GT                           | (II/2) Master or Chief Mate >500 GT or greater qualification         |
| (II/2.1) Master >3000 GT                       | (II/2.1) Master >3000 GT                                             |
| (II/2.1) Chief Mate >3000 GT                   | (II/2.1) Mate >3000 GT or greater qualification                      |
| (II/2.3) Master between 500-3000 GT            | (II/2.3) Master between 500-3000 GT or greater qualification         |
| (II/2.3) Chief Mate between 500-3000 GT        | (II/2.3) Mate between 500-3000 GT or greater qualification           |
| (II/3.2) Master <500 GT                        | (II/3.2) Master <500 GT or greater qualification                     |
| (II/3.5) Master <500 GT Near Coastal           | (II/3.5) Master <500 GT Near Coastal or greater qualification        |
| (II/4) RFPNW                                   | (II/3.5) Master <500 GT Near Coastal or greater qualification        |
| (II/5) Able Seafarer Deck >500 GT              | (II/3.5) Master <500 GT Near Coastal or greater qualification        |
| <b>ENGINE</b>                                  | <b>Minimum Qualification of Assessor</b>                             |
| (III/1) OICEW >750 kW                          | (III/3) Second Engineer between 750-3000 kW or greater qualification |
| (III/2) Chief Engineer >3000 kW                | (III/2) Chief Engineer >3000 kW                                      |
| (III/2) Second Engineer >3000 kW               | (III/2) Second Engineer >3000 kW or greater qualification            |
| (III/3) Chief Engineer between 750-3000 kW     | (III/3) Chief Engineer between 750-3000 kW or greater qualification  |
| (III/3) Second Engineer between 750-3000 kW    | (III/3) Second Engineer between 750-3000 kW or greater qualification |
| (III/4) RFPEW >750 kW                          | (III/3) Second Engineer between 750-3000 kW or greater qualification |
| (III/5) Able Seafarer Engine >750 kW           | (III/3) Second Engineer between 750-3000 kW or greater qualification |
| (III/6) Electro-Technical Officer >750 kW      | (III/3) Second Engineer between 750-3000 kW or greater qualification |
| (III/7) Electro-Technical Rating >750 kW       | (III/6) Electro-Technical Officer or greater qualification           |

Appendix B



**COMMONWEALTH OF DOMINICA  
MARITIME ADMINISTRATION**

**APPLICATION FOR ENGAGEMENT  
AS A FLAG STATE ASSESSOR**

PLEASE COMPLETE IN CAPITAL LETTERS IN BLACK INK OR BY TYPING AND READ ALL EXPLANATORY NOTES

| Part A - PERSONAL DETAILS OF APPLICANT                                                                            |                                 |                                                                         |                     |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------|---------------------|
| 1) Family name:                                                                                                   |                                 | 2) Given name(s):                                                       |                     |
| Address of Applicant: Home address to be given. Documents will be sent to this address unless requested otherwise |                                 |                                                                         |                     |
| 3) Address Line 1                                                                                                 |                                 |                                                                         |                     |
| 4) Address Line 2                                                                                                 |                                 |                                                                         |                     |
| 5) Town/City                                                                                                      |                                 | 6) County/State                                                         |                     |
| 7) Post/Zip Code (if available)                                                                                   |                                 |                                                                         |                     |
| 8) Country                                                                                                        |                                 |                                                                         |                     |
| 9) Tel:                                                                                                           | 10) Fax:                        | 11) Email:                                                              |                     |
| 10) Passport No                                                                                                   | 12) Nationality:                | 13) Date of birth (dd/mm/yy):                                           | 14) Place of birth: |
| Part B - BUSINESS DETAILS (Insert name & details if Applicant trades under a business name)                       |                                 |                                                                         |                     |
| 15) Name:                                                                                                         |                                 | 16) Type (e.g. Limited Liability Co., Partnership, Sole Proprietorship) |                     |
| 17) Address (If same as Applicant, state "same as above")                                                         |                                 |                                                                         |                     |
| 18) Address Line 1                                                                                                |                                 |                                                                         |                     |
| 19) Address Line 2                                                                                                |                                 |                                                                         |                     |
| 20) Town/City                                                                                                     |                                 | 21) County/State                                                        |                     |
| 22) Post/Zip Code (if available)                                                                                  |                                 |                                                                         |                     |
| 23) Country                                                                                                       |                                 |                                                                         |                     |
| 24) Tel:                                                                                                          | 25) Fax:                        | 26) Email:                                                              |                     |
| Part C - PROFESSIONAL & TECHNICAL EDUCATION (i.e. college/university education)                                   |                                 |                                                                         |                     |
| 27) NAME & LOCATION OF COLLEGE/UNIVERSITY (highest level only)                                                    |                                 | 28) CERTIFICATES OBTAINED                                               |                     |
|                                                                                                                   |                                 |                                                                         |                     |
|                                                                                                                   |                                 |                                                                         |                     |
|                                                                                                                   |                                 |                                                                         |                     |
| PROFESSIONAL TRAINING COURSES ATTENDED (Attach Copies of certificates – continue on separate sheet if required)   |                                 |                                                                         |                     |
| 29) Dates:                                                                                                        | 30) Name of Organization/Course | 31) Professional Qualification gained (if any):                         |                     |
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| <b>Part D – ASSESSMENT/INSTRUCTION EXPERIENCE</b> (Most recent first - continue on separate sheet if required) |                   |                                   |                                         |
|----------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------|-----------------------------------------|
| 32) From (dd/mm/yy)                                                                                            | 33) To (dd/mm/yy) | 34) Name of Organization/Business | 35) Position held/assessments conducted |
|                                                                                                                |                   |                                   |                                         |
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| <b>Part E – ASSESSMENT AUTHORIZATION</b> (Please indicate which proficiency(ies) and/or competency(ies) you consider can be supported by your experience or qualifications) |     |                                          |     |                                                |     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------------------------------------------|-----|------------------------------------------------|-----|
| 36) (II/1) OICNW >500 GT                                                                                                                                                    | [ ] | 42) (II/3.5) Master <500 GT Near Coastal | [ ] | 48) (II/3) Chief Engineer between 75-3000 kW   | [ ] |
| 37) (II/2.1) Master >3000 GT                                                                                                                                                | [ ] | 43) (II/4) RFPNW                         | [ ] | 49) (II/3) Second Engineer between 750-3000 kW | [ ] |
| 38) (II/2.1) Chief Mate >3000 GT                                                                                                                                            | [ ] | 44) (II/5) Able Seafarer Deck >500 GT    | [ ] | 50) (II/4) RFPEW >750 kW                       | [ ] |
| 39) (II/2.3) Master between 500-3000 GT                                                                                                                                     | [ ] | 45) (III/1) OICEW >750 kW                | [ ] | 51) (II/5) Able Seafarer Engine >750 kW        | [ ] |
| 40) (II/2.3) Chief Mate between 500-3000 GT                                                                                                                                 | [ ] | 46) (III/2) Chief Engineer >3000 kW      | [ ] | 52) (II/6) Electro-Technical Officer >750 kW   | [ ] |
| 41) (II/3.2) Master <500 GT                                                                                                                                                 | [ ] | 47) (III/2) Second Engineer >3000 kW     | [ ] | 52) (II/7) Electro-Technical Rating >750 kW    | [ ] |

**53) Part F – DECLARATION – TO BE COMPLETED BY ALL APPLICANTS**

I hereby declare that the information contained on this application is true and correct and I apply for authorisation as a "Designated Assessor". I am aware that if I submit false information, Certificates or other documents that are later found to be fraudulent or not authentic, that any Authorization will be cancelled immediately and I will not be allowed to act for the Commonwealth of Dominica Maritime Administration in the future.

54) **Signature of Applicant**

Please keep your signature within the box and sign without touching any of the box lines

56) **Signature of Witness**

55) **Date of Application**

57) **Print Name of Witness**

58) **Part H – SUPPORTING DOCUMENTS REQUIRED WITH APPLICATION**

| <b>*SUPPORTING DOCUMENTS REQUIRED (all applications):</b> |                                                                                                                  | <i>Attached<br/>(please tick)</i> | <i>For Official<br/>use</i> |
|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------|
| 1                                                         | Authenticated copy of National passport – showing personal details as per those entered on this Application Form |                                   |                             |
| 2                                                         | 2 x Passport size photos - with applicants name printed on the reverse                                           |                                   |                             |
| 3                                                         | Scanned image of applicants signature                                                                            |                                   |                             |
| 4                                                         | Copies of Education & Training certificates (including COCs)                                                     |                                   |                             |
| 5                                                         | Copy of applicants CV/Resume                                                                                     |                                   |                             |
| 6                                                         | Copies of sea service letters or other documentary evidence of experience                                        |                                   |                             |
| 7                                                         | Any additional evidence of specialized training for special qualifications                                       |                                   |                             |

**EXPLANATORY NOTES FOR APPLICANTS:**

- 1) Failure to complete the Application Form fully or submit the required documentation may result in rejection or delays in processing.
- 2) Applicants must sign in the box shown, keeping their signature within the box lines.
- 3) Applicants may initially submit their application by scanning the Application Form and supporting documents and submitting by email to [mariner@dominica-registry.com](mailto:mariner@dominica-registry.com).
- 4) All supporting documents submitted must be clear copies and legible and in English.
- 5) Authentication of documents can be accepted by: Notary or Consulate
- 6) For more information see the website [www.dominica-registry.com](http://www.dominica-registry.com)

| DATE RECEIVED | DATE ASSESSED | RESULT – AUTHORIZED/REJECTED | NOTES |
|---------------|---------------|------------------------------|-------|
|               |               |                              |       |