The Commonwealth of Dominica Office of the Maritime Administrator



CDMP-5000 Application Package for Original Officer Certificate of Competence

www.dominica-registry.com



THE COMMONWEALTH OF DOMINICA

Office of the Maritime Administrator

APPLICATION FOR ORIGINAL DOMINICA OFFICER'S STCW CERTIFICATE OF COMPETENCE, DOMINICA MARITIME LICENSE, AND SEAFARER'S ID BOOK

MAKE SURE ALL BOXES ARE COMPLETED. TYPE OR PRINT CLEARLY.

| PART I. PFR | SONAL DESCR | IPTION AND INFOR | RMATION: | | | | | | | |
|------------------|--|------------------------------------|----------------------|---|----------------|---------------------|----------|----------------------|---------|----------------|
| Last Name | | First Name (G | | Middle Initial | 2. Date of | of Birth (dd mm yy | yy) 3. | . Place of Bir | th (Cit | y and Country) |
| | | | | | | | | | | |
| 4. Permanent | address (street, city | and country) | | Address to which certificate is to be mailed (street, city and country) | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Telephone | Em | ail | | Telephone | | | | | | |
| 6. Name and | nergency | 7. Citizenship | | 7a. Passport N | umber | | | | | |
| | | | | | | | | | | |
| Telephone | Telephone Email | | | 8. Height | | 9. Weight | <u>'</u> | 10. Color of H | Hair | |
| 11. Color of ey | | Distinguishing Marks | | 13. Sex | | | | | | |
| | | • | | ☐ Male ☐ | Female | | | | | |
| DADTII DE | | ICE/CEDITIE/CATE | c . | | | | | | | |
| | | ISE/CERTIFICATES placing an "X" in | | II applicants a | re require | d to have a Dor | minica ' | SID | | |
| | am applying for: | pluoling all X III | mo propor som 7 | | | ADE: I am apply | | 0.0. | | |
| ☐ Certificate | of Competence AN | ID Seafarer's Identific | ation & Discharge Bo | | | rade of Certificate | of Comp | petence and | Seafa | rer's |
| Please choo | se grade/level of | certificate desired | <u> </u> | Iden | tification & L | Discharge Book | | | | |
| 1 10000 01100 | | ck Officers | | | | Engineerir | ng Offic | cers | | |
| Grade | < 500 GT | 500<>3000 | > 3000 GT | Grade | | | | <> 3000 kW > 3000 kW | | 0 kW |
| Master | ☐ II/3.5 | ☐ II/2.3 | ☐ II/2.1 | Ch. Enginee | r N/A | \ | III/3.1 | | | /2.1 |
| Chief Mate | N/A | ☐ II/2.3 | ☐ II/2.1 | 2 nd Engineer | N/A | \ | III/3.1 | □III/2.1 | | /2.1 |
| OICNW | ☐ II/3.3 | ☐ II/1 (>500 GT) | | OICEW | N/A | | III/1 | | | /1 |
| OICNW | ☐ II/3.4 near co | astal | | Electro-Tech | nical Office | er 📗 | III/6 | | | |
| Note Limitat | ions horo: 🗆 No | t for Service on Tanke | ore Motor Mo | thor (places end | ocifu) | | | | | |
| Note Limitat | ions here. 🗀 No | tiol Service on Talike | is Motor Of | illei (piease spe | city) | | | | | |
| GMDSS Cert | ificate of Compe | etence | | | | 0 | riginal | Replacem | nent | Renewal |
| I am applying | for a Certificate | of Competence for C | GMDSS/Radio Offic | cer Certificate - I | Reg. IV/2 | | | | | |
| Ship Securit | y Officer Certific | ate of Proficiency | | | | | | Origina | ıl | Replacement |
| | | of Proficiency as Sh | | - Reg. VI/5 | | | | | | П |
| | | ard vessels over 500 | gross tons) | | | | | | | |
| • | ning Certificate o | | | | | | | Origina | al | Replacement |
| | for a Certificate on the below choi | of Proficiency for Traces: | aining required to s | erve in certain f | unctions o | nboard ships: | | | | |
| ☐ V/1-1.3 – C | il Tanker Personne | el Advanced | □ V/1-1 | .5 - Chemical Ta | nker Persor | nnel Advanced | | | | |
| | iquefied Gas Tank | | | Personnel on Pa | - | | | | | |
| | ical Care Person in | Charge | ☐ VI/6 - | Security Awarer | ess Trainin | g/Security Trainin | g | | | |
| Examination | | for a Daniel Co. P | Davis IT: " | | | | | | | |
| | | for a Dominica licer | ise. Desired Testin | g Area: | | | | | | _ |
| Training Rec | | | | | | | | | | |
| I I hereby apply | hereby apply for a Training Record Book for upgrade to capacity: | | | | | | | | | |

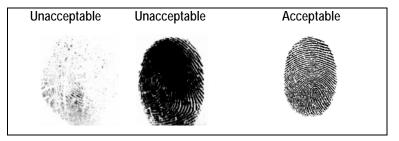
| Applicant Name: | | Name of | f vessel on wh | ich now serving (o | r will join): | |
|---|--|-------------------------------------|---|-----------------------------------|-------------------------|------------------------|
| PART III. DESCR | IPTION OF HIGHEST GRADE DON | IINICA AND FOR | REIGN CERTIF | FICATE OF COMP | ETENCE NOW HELD |). IF ANY: |
| | Grade of Certificate of Competence | Certificate | | Date Issued | Date Expires | Country of Issue |
| Dominica | • | | | | <u>'</u> | Dominica |
| Foreign | | | | | | |
| PART IV. SEA SERVICE | | | | | | |
| Submit proof of at least the minimum service required (See Attachment A to this application for specific license requirements) during the last five years or more to establish eligibility for the Certificate of Competence requested. This proof may include copies of your discharge book sea service pages (ensure your Seafarer Book ID# is visible on each page) and/or sea service letters provided by your employer. At minimum, this proof shall include: 1. Propulsion (Steam or Motor) 2. Name of Vessel 3. Deck Officers list Gross Tons/ Engineers list kW Propulsion Power 4. Flag 5. Name of Managing Operator 6. Capacity in which served 7. Period of Service | | | | | | |
| | | | | | | |
| PART V. APPLIC MUST READ AND | PART VI. APPLICANTS FOR STCW CERTIFICATE OF COMPETENCE AT THE MANAGEMENT LEVEL MUST SIGN THIS AFFIDAVIT/ACKNOWLEDGMENT. | | | | | |
| By affirming my signature below, I acknowledge that I am obliged to ensure and maintain the secrecy of all telecommunications of which I may gain knowledge in the course of my services, and that I am likewise obliged not to reveal the existence or contents of any correspondence to anyone other than the addressee. My signature further acknowledges that, if I should breach these obligations, my Certificate of Competence issued pursuant to this application may be suspended and/or revoked. | | | These applicants include Master and Chief Mate applicants for the service on board ships of 500 gross tonnage or more, as well as Chief Engineer and Second Engineer applicants for service on board ships powered by main propulsion machinery of 750 kW propulsion power or more. I hereby understand that I will become familiar with the national maritime legislation of the Commonwealth of Dominica relevant to the functions to be performed by me for which I have applied to be certificated, and that those regulations are available on the Administration's website: www.dominica-registry.com . | | | |
| Signature | | | Signature | | | |
| Copies of the following identity documents (with name and numbers visible) indicated below are being submitted with this application. Originals are required at time of testing: Seafarer's Book or Card Passport Commonwealth of Dominica Certificate | | | | | | |
| | | | | | | |
| PART VII. AFFIDA | AVIT OF APPLICANT | APPLI | CATION CAN | NOT BE ISSUED | UNLESS APPLICAN | Γ SIGNS BELOW |
| knowledge and be | all information provided by me in th lief; further, that no certificate issued explanation of the circumstances is a | is application and to me heretofore | I its supporting by any Gover | documents and priment has ever be | roofs are true and corr | rect to the best of my |
| Date of Application | | Signature of Ap | plicant | | | |
| | | | | | | |

| PART VIII. IDENTIFICATION INFORMATION | | |
|--|------------------------------|---|
| MARINER APPLICANT FULL NAME : | DATE OF BIRTH: | |
| PASSPORT# | | |
| Signature: Please use the space below to sign your name clearly, without touching any of the box lines. This signature will be transferred to your Seafarer's ID book. | PLEASE STAY WITHIN THE LINES | PHOTO - ORIGINAL COLOR PHOTO - CLEAR RESOLUTION |

Thumbprint: Please use the spaces below for 2 copies each of your left and right thumbprint. Using a traditional blue or black inkpad, roll your thumb from the outer edge over to the right edge in the inkpad and then in the space below, roll from left to right onto the paper to create a clear imprint (repeat the process of inking and transferring for each imprint). We are asking for multiple imprints, so we may select the clearest one for imprinting on your Seafarer's ID book.

| LEFT THUMB | | RIGHT THUMB | | |
|--------------|--------------|--------------|--------------|--|
| Thumbprint 1 | Thumbprint 2 | Thumbprint 1 | Thumbprint 2 | |
| | | | | |
| | | | | |
| | | | | |
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EXAMPLES



PART IX GENERAL INFORMATION AND INSTRUCTIONS

- 1. READ INSTRUCTIONS CAREFULLY. Enter all required information. Please use computer or print legibly. Failure to properly complete this application or to submit required supporting proofs, etc. will result in rejection of the application or delay its approval. PLEASE DO NOT STAPLE THE APPLICATION OR ITS ATTACHMENTS.
- 2. WHERE TO APPLY. Applications must be submitted, by mail or in person, to: Dominica Maritime Registry, Inc., 32 Washington Street, Fairhaven, Massachusetts 02719 USA

GENERAL INFORMATION

- (a) This application is subject to the approval of the Maritime Administrator, Commonwealth of Dominica. In the event approval is not granted, all application documents together with the issuance fee (less shipping costs) shall be returned to the applicant at the mailing address indicated. If the application is approved, the issued certificate/identification book will be sent to the mailing address indicated. The 'certified copy' of Form CDMP-5000 is to be retained by the seafarer as evidence that the application is being processed.
- (b) Seafarer's ID and Discharge Book (SIB): This identification document conforms to the requirements of the International Labor Organization (ILO) Convention No. 185 (Seafarer's Identity Documents Convention, 2003). It is issued to seafarers of Commonwealth of Dominica flag vessels for use when traveling to or from an assigned vessel or pursuant to instructions from the master of such a vessel. Other uses of the book must be in conformity with Commonwealth of Dominica regulations. ILO 185 does not in any way restrict the right of a member nation from preventing any particular individual from entering or remaining in its territory.
- (c) The SIB and Training Record Books are issued under the authority of Chapter 8 of the International Maritime Act 2000, as amended. The SIB and TRB remain the property of the Maritime Administrator and may be withdrawn at any time. It may not be altered in any way (other than for the purpose of recording sea time or to records completed assessments) nor be allowed to pass into the possession of an unauthorized person. If the TRB becomes filled with entries, requires alteration, becomes damaged, application for a replacement TRB should be made immediately. If the SIB, TRB or Certificate of Competence is stolen, lost, or accidentally destroyed, notification should be given immediately to office of the Maritime Administrator, and an application for a replacement SID/TRB may be made along with an Affidavit of Lost, Stolen or Destroyed Certificate or Document. (Form CDMP-5000 and CDMP-4007)
- 4. AGE AND CITIZENSHIP REQUIREMENTS. Please refer to Appendix A for age requirements for specific licenses and endorsements. Applicants may be of any nationality and need not be citizens or residents of the Commonwealth of Dominica.
- 5. TRAINING REQUIREMENTS. Applicants for a Dominica certificate or endorsement must meet the applicable training and sea-time requirements and submit copies of training certificates with their application. Appendix A lists these requirements by STCW regulation number and license, including training required for personnel on certain types of ships.
- 6. GLOBAL MARITIME DISTRESS AND SAFETY SYSTEM (GMDSS) CERTIFICATES.
 - (a) Restricted Operator Previous service not required. The candidate must pass the written examination for a certificate as GMDSS Restricted operator or present a foreign certificate in equivalent grade.
 - (b) General Operator (STCW Reg. IV/2.2) Previous service not required. The candidate must complete an approved course for a certificate as GMDSS General Operator or present a foreign certificate in equivalent grade.
- 7. SEA SERVICE REQUIREMENTS. Applicants for Dominica original license and/or examinations must provide proof of the minimum amount of sea service/marine training required for the grade of certificate for which application is made (see Appendix A for sea service requirements for specific licenses). Applicants for an original, renewal or upgrade Certificate of Competence must show one (1) year's sea service in the last five (5) years.
- 8. DOCUMENTS TO BE FILED WITH APPLICATION. The following documents, letter and proofs must be submitted together with this application (See Appendix A for requirements by STCW Regulation)
 - (a) Two (2) color 2.0" x 2.0" (50 mm. x 50 mm.) photographs facial front view of applicant, passport size, taken within one (1) year preceding application with applicant's signature and name printed on reverse side. Please do not staple.
 - (b) Physical Examination Report (in this package) The physical examination must be carried out not more than 12 months prior to date of making application. Form CDMP-3033A.
 - (c) Identity Document A copy of a valid passport along with a valid seaman's document or certificate of competence from another maritime nation. A copy of these documents must be submitted with the application. Applications for renewal must include a copy of the previously issued documents as proof of identity. Documents shall be provided in English.
- 9. FEES. Our complete fee schedule is available in Policy Letter 01-14 and is available on our website www.dominica-registry.com. Payment must be made by check, credit card, wire or money order drawn on a U.S. Bank and payable in U.S. dollars to "Dominica Maritime Registry, Inc."



COMMONWEALTH OF DOMINICA PHYSICAL EXAMINATION REPORT

| ast Name | | First Na | ame | Middle In | itial | | |
|--|-------|-------------|--|-----------|----------------|--|--|
| | | | | | | | |
| Date of birth | | | of Birth | Sex | | | |
| | | | City Country | | | | |
| Mailing address of applicant | | | ment: | ☐ Fema | 110 | | |
| | | | Deck officer | | | | |
| assport number and country of issue: | | Routine | e and emergency duties (if known): | | | | |
| ype of ship: | | Trade a | area: | | | | |
| xaminee's Personal Declaration: | | | | | | | |
| xaminee's Personal Declaration: o be completed by the seafarer with the help ave you ever had any of the following condition | | if requeste | od) | | | | |
| be completed by the seafarer with the help ave you ever had any of the following condition | | if requeste | Condition | YES | NO | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? | YES | N(| | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery | YES | N(| | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures | YES | NO | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting | YES | N(| | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness | YES | N(| | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems | YES | N ⁽ | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression | YES | NM C | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide | YES | NN C | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory | YES | NN | | |
| be completed by the seafarer with the help of ave you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem | YES | NN C | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Kidney problem | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem 29. Severe headaches | YES | | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Kidney problem Skin problem | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem | YES | N I | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Kidney problem Skin problem Allergies | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem 29. Severe headaches 30. Ear (hearing, tinnitus)/nose/throat problem 31. Restricted mobility | YES | | | |
| be completed by the seafarer with the help of the you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Kidney problem Skin problem Allergies Infectious/contagious diseases | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem 29. Severe headaches 30. Ear (hearing, tinnitus)/nose/throat problem 31. Restricted mobility 32. Back or joint problem | YES | | | |
| be completed by the seafarer with the help of ave you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Kidney problem Skin problem Allergies Infectious/contagious diseases Hernia | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem 29. Severe headaches 30. Ear (hearing, tinnitus)/nose/throat problem 31. Restricted mobility 32. Back or joint problem 33. Amputation | YES | | | |
| be completed by the seafarer with the help of ave you ever had any of the following condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins/piles Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Kidney problem Skin problem Allergies Infectious/contagious diseases Hernia | ons?: | · | Condition 19. Do you smoke, use alcohol or drugs? 20. Operation/surgery 21. Epilepsy/seizures 22. Dizziness/fainting 23. Loss of consciousness 24. Psychiatric problems 25. Depression 26. Attempted suicide 27. Loss of memory 28. Balance problem 29. Severe headaches 30. Ear (hearing, tinnitus)/nose/throat problem 31. Restricted mobility 32. Back or joint problem | YES | | | |

| Additional Questions | | YES | NO |
|--|---|---------------|----|
| 35. Have you ever been signed off sick or repatriated from a ship? | | | |
| 36. Have you ever been hospitalized? | | | |
| 37. Have you ever been declared unfit for sea duty? | | | |
| 38. Has your medical certificate ever been restricted or revoked? | | | |
| 39. Are you aware that you have any medical problems, diseases, or illnesses? | | | |
| 40. Do you feel healthy and fit to perform the duties of your designated position/occupation | 1? | | |
| | | | |
| Comments: | | | |
| on money. | | | |
| | | | |
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| | | | |
| | | | |
| | | | |
| Additional Questions | | YES | NO |
| 41. Are you allergic to any medication? | | | |
| | · | | |
| If yes, please list the medications taken, and the purpose(s) and dosage(s): | | | |
| in year, produce not the modulation tanon, and the purpose(o) and decode (o). | | | |
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| | | | |
| Attestations | | | |
| | | | |
| | | | |
| I hereby certify that the personal declaration above is a true statement to the best | of my knowledge | | |
| Thereby certify that the personal acciditation above is a trac statement to the best | of my knowledge. | | |
| | | | |
| Signature of examinee: | Date (dd/mm/yyyy): | | |
| | | | |
| Witnessed by (signature): | Name: | | |
| withessed by (signature). | Name. | | |
| | | | |
| I hereby authorize the release of all my previous medical records from any health profes | sionals, health institutions and public | c authorities | to |
| Dr (the approved medical practition | ner). | | |
| | ,. | | |
| | | | |
| Signature of examinee: | Date (dd/mm/yyyy): | | |
| | | | |
| Witness by (signature): | Name: | | |
| Thin ood by folgridiano). | Huillo | | |
| | | | |
| Date and contact details for previous medical examination (if known): | | | |

Part II MEDICAL EXAMINATION (This section to be completed by physician)

| Sight | | | | | | | | | | |
|--------------------|-----------------------|-------------|------------------|------------|--------|------------|---------------------------------------|---------|--------|-----------|
| | r contact lenses: YES | □ NO □ | (if yes, specify | which type | and fo | or what p | urpose): | | | |
| 9.0.000 | | | () 00, 0000) | | | ,a. p | p000/. | | | |
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| | | | | | | | | | | |
| Visual Acuity | | امداما | ام. | | | | | ۸:۵۵ ما | | |
| | Dialet Fue | Unaide | | Dima audan | | D:«I | ht Fue | Aided | | Dingoular |
| Distant | Right Eye | Left Ey | e i | Binocular | | Rigi | ht Eye | Left Ey | /e | Binocular |
| Distant Near | | | | | | | | | | |
| iveai | | | | | | | | | | |
| Visual Fields | | | | | | | | | | |
| Visual i leius | | | | | | | | | | |
| | Normal | | Defective | | | | | Normal | | Defective |
| Right Eye | Normal | | Beleetive | I ef | t Eye | | | Norman | | Delective |
| Right Lyc | | | | Loi | Lyc | | | | | |
| Colour Vision | | | | | | | | | | |
| October Vision | | | | | | | | | | |
| □ Not tested | □ Normal □ | Doubtful | □ Defect | ive | | | | | | |
| 1101 100104 | | _ Doubliui | _ D0.000 | | | | | | | |
| Hearing | | | | | | | | | | |
| | | Pure tone a | nd audiometry | (threshold | values | s in dB) | | | | |
| | 500 HZ | | 1000 HZ | | 00 HZ | | 30 | 00 HZ | | |
| Right Ear | | | | | | | | | | |
| Left Ear | | | | | | | | | | |
| | 1 | | Į. | | | l | | | | |
| Speech and Wh | isper Test (metres) | | | | | | | | | |
| • | . , , | | | | | | | | | |
| | Normal | Wh | isper | | | | Norma | al | Whis | per |
| Right Ear | | | | Left Ear | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Clinical Finding | JS | | | | | | | | | |
| Height: | (cm) | | | Weig | | | (kg) | | | |
| Pulse rate: | /(min.) | | | Rhyt | | | | | | |
| Blood pressure S | | nmHg) | | Dias | tolic: | | (mm/Hg |) | | |
| Urinalysis: Glu | cose: | Protei | n: | | | | Blood: | | | |
| | | | | | | | | | | |
| | | | | _ | | | | | | |
| | | Normal | Abnormal | | | | | | Normal | Abnormal |
| Head | | | | | Skin | | | | | |
| Sinuses, nose, thr | roat | | | | | ose vein | | | | |
| Mouth/teeth | | | | | Vasc | ular (inc. | . pedal pulse | s) | | |
| Ears (general) | | | | | Abdo | men and | d viscera | | | |
| Tympanic membra | ane | | | | Hern | ia | _ | | | |
| Eyes | | | | | Anus | (not rec | tal exam) | | | |
| Ophthalmoscopy | | | | | | system | · · · · · · · · · · · · · · · · · · · | | | |
| Pupils | | | | | | | wer extremiti | es | | |
| Eye movement | | | | | | | /S and L/S) | | П | |
| Lungs and chest | | | | _ | | | (full/brief) | | | |
| Breast examination | on | П | П | \dashv | | hiatric | (1.3 2.101) | | П | П |
| | | | | 1 | | | | | | |

General appearance

Heart

| Chest X-ra | ay | | | | |
|---|------------------------------|-------------|------------------------------|--|--------------------------------------|
| | Not performed | | Performed on (dd/mm/y | /yyy): | |
| | | | | | |
| Nosuits. | | | | | |
| Other Diagnostic Test(s) and Result(s): | | | | | |
| Test: Result: | | | | | |
| | | | | | |
| Medical pr | actitioner's comments and a | ssessme | ent of fitness, with reasons | for any limitations: | |
| | | | | | |
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| On the bas medically: | sis of the examinee's person | ial deciar | ation, my clinical examina | tion and the diagnostic test results red | corded above, I declare the examinee |
| | Fit for duty | □ No | ot fit for duty | | |
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MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Training Record Book or certification of special qualification shall be required to have a physical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer certificate, application for seafarer's identity document, or application for certification of special qualifications. This physical examination must be carried out not more than 12 months prior to the date of making application for an officer certificate, certification of special qualifications, or a seafarer's book. Such proof of examination must reestablish that the applicant is in satisfactory physical condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession. In addition, the following minimum requirements shall apply:

- 1) All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in the better ear at 15 feet and in the poorer ear at 5 feet.
- 2) Deck officer applicants must have (either with or without corrective lenses) at least 20/20 vision in one eye and at least 20/40 in the other. If the applicant uses corrective lenses, he must have vision without corrective lenses of at least 20/160 in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- 3) Engineer and radio officer applicants must have (whether with or without corrective lenses) at least 20/30 vision in one eye and at least 20/50 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/200 in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- 4) An applicant's blood pressure must fall within an average range, taking age into consideration.
- 5) Applicants afflicted with any of the following diseases or conditions may be disqualified:
 - a) Epilepsy;
 - b) Insanity;
 - c) Senility;
 - d) Psychosis;
 - e) Psychoneurosis:
 - f) Dementia;
 - g) Personality disorder;
 - h) Alcoholism;
 - i) Tuberculosis;
 - j) Acute venereal disease or neurosyphilis;
 - k) AIDS:
 - I) The use of narcotics;
 - m) Hepatitis;
 - n) Malaria
 - o) Sexually transmitted diseases:
 - p) Adrenal insufficiency, uncontrolled;
 - q) Diabetes mellitus, all cases requiring insulin;
 - r) Immunosuppressive therapy;

- s) Obesity, incapacitating function;
- t) Thyroid disease:
- u) Diseases of the blood or blood forming organs;
- v) Meniere's diseases;
- w) Post-concussion syndrome;
- x) Heart disease;
- y) Hypertension;
- z) Arterial disease;
- aa) Cerebrovascular disease;
- bb) Diseases of veins:
- cc) Bronchial asthma
- dd) Pulmonary fibrosis:
- ee) Gross deformity of the chest wall;
- ff) Pneumothorax;
- gg) Tumors;
- hh) Peptic ulcers;
- ii) History of gastro-intestinal bleeding/perforation;

- i) Recurrent appendicitis:
- (k) Cholelithiasis, cholecystitis, cholangitis:
- II) Liver cirrhosis:
- mm) Pancreatitis, recurrent:
- nn) Intestinal stoma;
- oo) Perianal pathology;
- pp) Renal failure;
- qq) Urinary tract obstruction;
- rr) Prostatism;
- ss) Removal of one kidney;
- tt) Renal transplantation;
- uu) Hydrocoele, large, symptomatic;
- vv) Osteoarthritis:
- ww) Recurrent dislocation of major joint;
- xx) Infection or inflammatory ear conditions:
- yy) Sleep disorders; and
- zz) Severe speech impediment.
- 6) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- Applicants for RFPNW, Ordinary Seaman, Able Seafarer Deck, Cook, Deck Cadet or any deck rating position must meet the physical requirements for a deck/navigational officer's certificate.
- 8) Applicants for RFPEW, Able Seafarer Engine, Electro Technical Rating, Tankerman, Engine Cadet or any other engineering rating must meet the physical requirements for an engineer officer's certificate.

ATTACHMENT A: REQUIREMENTS FOR DOMINICA OFFICER CERTIFICATES OF COMPETENCE & ENDORSEMENT AND SPECIAL QUALIFICATIONS

DECK LICENSES

| REG: II/1 Officer in charge of a navigational watch, on ships of 500 gross tonnage or more (Oceans) | | | | |
|---|--|--|--|--|
| General Requirements □ Age – 18 years ○ Submit copy of Passport □ Sea service - 3 years sea-service or 1 year sea service as part of approved training program ○ Submit Sea Service Letters or copies of discharge papers ○ 1/3 of Sea time must be completed on ships of respective tonnage/propulsion power according to | Training Requirements (Submit copies of training certificates) ARPA GMDSS* Basic Safety Training Bridge Resource Management Celestial Navigation Advanced Firefighting ECDIS Radar | | | |
| application Min. 6 months supervised bridge watch duties during sea time Submit letter from Company/Vessel Dominica Application and Physical Exam Ensure application is complete Include copy(s) of any previously or currently held licenses or Certificates of Competency | □ OICNW > 500 GT Course □ Proficiency in survival craft □ Proficiency in medical first aid+ □ Proficiency in fast rescue boats ☞ ☞ □ Ship Security Officer Training * GMDSS training is required only for personnel serving on ships with the respective equipment installed. + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. ☞ Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats | | | |

| REG: II/2.1 Master on ships of 3000 gross t | onnage or more (Oceans) |
|--|---|
| | · , , |
| Constant Programme | Turking Developments (O. L. W |
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) |
| ☐ Age – 21 years | □ ARPA |
| Submit copy of passport | □ GMDSS* |
| □ Sea service - 36 months as OICNW or 24 months as | □ Basic Safety Training |
| OICNW with 12 months service as Chief Mate | □ Bridge Resource Management |
| Submit Sea Service Letters or copies of | ☐ Celestial Navigation (for oceans endorsement) |
| discharge papers | □ Advanced Firefighting |
| ☐ 1/3 of Sea time must be completed on ships of | □ ECDIS |
| respective tonnage/propulsion power according | □ Radar |
| to application | ☐ Master/Mate greater than 500 GT |
| | □ Proficiency in survival craft |
| □ Dominica Application and Physical Exam | □ Proficiency in medical first aid+ |
| Ensure application is complete | □ Proficiency in fast rescue boats 🇨 😭 |
| Include copy(s) of any previously or currently held licenses or Certificates of Competency | □ Ship Security Officer Training |
| , , , , , , , , , , , , , , , , , , , | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. |
| | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for |
| | Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. |
| | Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats |
| | |

| REG: II/2.1 Master on ships of 3000 gross tonnage or more, near coastal | | | | | |
|---|---|--|--|--|--|
| | | | | | |
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) | | | | |
| ☐ Age – 21 years | □ ARPA | | | | |
| Submit copy of passport | □ GMDSS* | | | | |
| ☐ Sea service - 36 months as OICNW or 24 months as | ☐ Basic Safety Training | | | | |
| OICNW with 12 months service as Chief Mate | ☐ Bridge Resource Management | | | | |
| Submit Sea Service Letters or copies of | □ Advanced Firefighting | | | | |
| discharge papers | □ ECDIS | | | | |
| □ 1/3 of Sea time must be completed on ships of | □ Radar | | | | |
| respective tonnage/propulsion power according to | ☐ Master/Mate greater than 500 GT | | | | |
| application | □ Proficiency in survival craft | | | | |
| | ☐ Proficiency in medical first aid+ | | | | |
| □ Dominica Application and Physical Exam | ☐ Proficiency in fast rescue boats ☞ ☞ | | | | |
| Ensure application is complete | ☐ Ship Security Officer Training | | | | |
| Include copy(s) of any previously or currently held | | | | | |
| licenses or Certificates of Competency | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. | | | | |
| | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for | | | | |
| | Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. →→Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats | | | | |
| | Frontierity in Fast rescue boats training is required only for personner serving on ships with Fast rescue boats | | | | |
| | | | | | |

| REG: II/2.1 Chief mate on ships of 3000 gros | s tonnage or more (Oceans) |
|---|---|
| General Requirements | Training Requirements (Submit copies of training certificates) |
| ☐ Age – 19 years | □ ARPA |
| Submit copy of passport | □ GMDSS* |
| | □ Basic Safety Training |
| □ Sea service - 12 months as OICNW | ☐ Bridge Resource Management |
| Submit Sea Service Letters or copies of | ☐ Celestial Navigation (for oceans endorsement) |
| discharge papers | □ Advanced Firefighting |
| 1/3 of Sea time must be completed on ships of | □ ECDIS |
| respective tonnage/propulsion power according to | □ Radar |
| application | ☐ Master/Mate greater than 500 GT |
| | □ Proficiency in survival craft |
| □ Dominica Application and Physical Exam | □ Proficiency in medical first aid+ |
| Ensure application is complete | □ Proficiency in fast rescue boats ☞ ☞ |
| o Include copy(s) of any previously or currently held | □ Ship Security Officer Training |
| licenses or Certificates of Competency | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. |
| | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for |
| | Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. |
| | Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats |
| | |

| REG: II/2.1 Chief mate on ships of 3000 gro | oss tonnage or more, near coastal |
|---|---|
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) |
| ☐ Age – 19 years | □ ARPA |
| Submit copy of passport | □ GMDSS* |
| | □ Basic Safety Training |
| □ Sea service - 12 months as OICNW | □ Bridge Resource Management |
| Submit Sea Service Letters or copies of | ☐ Advanced Firefighting |
| discharge papers | □ ECDIS |
| 1/3 of Sea time must be completed on ships of | □ Radar |
| respective tonnage/propulsion power according to | ☐ Master/Mate greater than 500 GT |
| application | □ Proficiency in survival craft |
| | □ Proficiency in medical first aid+ |
| □ Dominica Application and Physical Exam | □ Proficiency in fast rescue boats ** |
| Ensure application is complete | ☐ Ship Security Officer Training |
| Include copy(s) of any previously or currently held | |
| licenses or Certificates of Competency | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. |
| | Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. |
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| REG: II/2.3 Master on ships of between 50 | 0 & 3000 gross tonnage (Oceans) |
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| | |
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) |
| ☐ Age – 21 years | □ ARPA |
| Submit copy of passport | □ GMDSS* |
| | □ Basic Safety Training |
| ☐ Sea service - 36 months as OICNW or 24 months as | □ Bridge Resource Management |
| OICNW with 12 months service as Chief Mate | ☐ Celestial Navigation (for oceans endorsement) |
| Submit Sea Service Letters or copies of | □ Advanced Firefighting |
| discharge papers | □ ECDIS |
| 1/3 of Sea time must be completed on ships of | □ Radar |
| respective tonnage/propulsion power according to | ☐ Master/Mate greater than 500 GT |
| application | □ Proficiency in survival craft |
| | □ Proficiency in medical first aid+ |
| □ Dominica Application and Physical Exam | ☐ Proficiency in fast rescue boats ☞ ☞ |
| Ensure application is complete | □ Ship Security Officer Training |
| Include copy(s) of any previously or currently held | |
| licenses or Certificates of Competency | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. |
| | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for |
| | Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats |
| | Transferred in the section bodis indiming to required only for personner serving on ships with the the source bodis |
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| REG: II/2.3 Master on ships of between 50 | 0 & 3000 gross tonnage, near coastal |
|---|--|
| General Requirements ☐ Age – 21 years | <u>Training Requirements</u> (Submit copies of training certificates) □ ARPA |
| Submit copy of passport □ Sea service - 36 months as OICNW or 24 months as OICNW with 12 months service as Chief Mate Submit Sea Service Letters or copies of discharge papers 1/3 of Sea time must be completed on ships of | □ GMDSS* □ Basic Safety Training □ Bridge Resource Management □ Advanced Firefighting □ ECDIS □ Radar □ Master/Mate greater than 500 GT |
| respective tonnage/propulsion power according to application □ Dominica Application and Physical Exam | □ Proficiency in survival craft □ Proficiency in medical first aid+ □ Proficiency in fast rescue boats ** □ Ship Security Officer Training |
| Ensure application is complete Include copy(s) of any previously or currently held licenses or Certificates of Competency | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. *Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats |

| REG: II/2.3 Chief mate on ships of between | en 500 & 3000 gross tonnage (Oceans) |
|--|---|
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| | |
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) |
| ☐ Age – 18 years | □ ARPA |
| Submit copy of passport | □ GMDSS* |
| | □ Basic Safety Training |
| □ Sea service - meet requirements of II/1 - OICNW | □ Bridge Resource Management |
| Submit Sea Service Letters or copies of | ☐ Celestial Navigation (for oceans endorsement) |
| discharge papers | □ Advanced Firefighting |
| 1/3 of Sea time must be completed on ships of | □ ECDIS |
| respective tonnage/propulsion power according to | □ Radar |
| application | ☐ Master/Mate greater than 500 GT |
| | □ Proficiency in survival craft |
| □ Dominica Application and Physical Exam | □ Proficiency in medical first aid+ |
| Ensure application is complete | □ Proficiency in fast rescue boats ** |
| Include copy(s) of any previously or currently held licenses or Certificates of Competency | □ Ship Security Officer Training |
| | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. |
| | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for |
| | Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. |
| | Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats |
| | |

| REG: II/2.3 Chief mate on ships of between | 500 & 3000 gross tonnage, near coastal | |
|---|---|--|
| | | |
| General Requirements ☐ Age – 18 years ☐ Submit copy of passport ☐ Sea service - meet requirements of II/1 - OICNW ☐ Submit Sea Service Letters or copies of discharge papers ☐ 1/3 of Sea time must be completed on ships of respective tonnage/propulsion power according to application ☐ Dominica Application and Physical Exam ☐ Ensure application is complete ☐ Include copy(s) of any previously or currently held licenses or Certificates of Competency | Training Requirements (Submit copies of training certificates) ARPA GMDSS* Basic Safety Training Bridge Resource Management Advanced Firefighting ECDIS Radar Master/Mate greater than 500 GT Proficiency in survival craft Proficiency in medical first aid+ Proficiency in fast rescue boats ☞ Ship Security Officer Training *GMDSS training is required only for personnel serving on ships with the respective equipment installed. + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Forficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats | |
| | | |
| REG: II/3.1 Officer in charge of a navigation | nal watch on ships of less than 500 gross tonnage (Oceans) | |
| See Regulation II/1 above for Officer in Charge of a Navigational Watch on ships of 500 gross tonnage or more | | |
| | | |
| REG: II/3.2 Master on ships of less than 50 | 0 gross tonnage (Oceans) | |
| See Regulation II/2.3 above for Master on ships of betw | een 500 & 3000 gross tonnage | |
| _ | | |
| | | |
| REG: II/3.3 Officer in charge of a navigation | al watch on ships of less than 500 gross tonnage, near coastal | |

| REG: II/3.5 Masters on ships of less than 500 gross tonnage, near coastal | |
|--|---|
| Wasters on ships of less than | gross tormage, near coustain |
| | |
| General Requirements | Training Requirements (Submit copies of training certificates) |
| ☐ Age – 20 years | □ ARPA |
| Submit copy of Passport | □ GMDSS* |
| □ Sea Service –12 months as OICNW | ☐ Basic Safety Training |
| Submit Sea Service Letters or copies of | ☐ Bridge Resource Management |
| discharge papers | □ Advanced Firefighting |
| 1/3 of Sea time must be completed on ships of | □ ECDIS |
| respective tonnage/propulsion power according to | □ Radar |
| application | ☐ Master/Mate less than 500 GT |
| □ Dominica Application and Physical Exam | □ Proficiency in survival craft |
| Ensure application is complete | □ Proficiency in medical first aid+ |
| Include copy(s) of any previously or currently held licenses or Certificates of Competency | □ Proficiency in fast rescue boats 🎤 🥙 |
| | * GMDSS training is required only for personnel serving on ships with the respective equipment installed. |
| | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency in Fast Rescue Boats training is required only for personnel serving on ships with Fast Rescue Boats |

ENGINE LICENSES

| REG: III/1 Officer in charge of an engineering watch in a manned engine-room or Designated duty engineer in a | | |
|---|---|--|
| periodically unmanned engine-room | | |
| General Requirements Age – 18 years Submit copy of Passport Sea Service 6 months sea-going plus 30 months training and education with completed TRB for III/1 sea time | Training Requirements □ Basic Safety Training □ Advanced Firefighting □ OICEW Course □ Proficiency in survival craft □ Proficiency in medical first aid+ □ Ship Security Officer Training | |
| Submit letter from Company/Vessel or copies of pages from discharge book(s) Dominica Application and Physical Exam Ensure application is complete Include copy(s) of any previously or currently held licenses or Certificates of Competency | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. | |
| REG: III/2 Chief engineer officer on ships powered by main propulsion machinery of 3,000 kW propulsion power or | | |
| more | | |
| General Requirements Age – 21 years | <u>Training Requirements</u> (Submit copies of training certificates) ☐ Basic Safety Training | |
| Submit copy of passport Meet Requirements for OICEW 6 months sea-going plus 30 months training and education with completed TRB for III/1 sea time | □ Advanced Firefighting □ Chief Engineer 3000 kW Course □ Proficiency in survival craft □ Proficiency in medical first aid+ □ Ship Security Officer Training | |
| Sea service 36 months sea service or 24 months with at least 12 months as a 2nd Engineer on vessel of 3000 kW propulsion power or more | | |
| Dominica Application and Physical Exam Ensure application is complete Include copy(s) of any previously or currently held licenses or Certificates of Competency | Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. | |

| REG: III/2 Second engineer officer on ships | Second engineer officer on ships powered by main propulsion machinery of 3,000 kW propulsion power or | |
|---|---|--|
| more | | |
| | | |
| General Requirements ☐ Age – 19 years ○ Submit copy of passport ☐ Meet Requirements for OICEW ○ 6 months sea-going plus 30 months training and education with completed TRB for III/1 sea | Training Requirements (Submit copies of training certificates) □ Basic Safety Training □ Advanced Firefighting □ 2 nd Engineer 3000 kW Course □ Proficiency in survival craft □ Proficiency in medical first aid+ | |
| time ☐ Sea service | □ Ship Security Officer Training | |
| o 12 months sea service as Assistant Engineer or Engineer Officer on vessel of 3,000 kW propulsion power or more o Submit letter from Company/Vessel or copies of pages from discharge book(s) □ Dominica Application and Physical Exam o Ensure application is complete o Include copy(s) of any previously or currently held licenses or Certificates of Competency | + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. | |

| II/3 Chief engineer officer on ships μ | owe | red by main propulsion machinery between 750 & 3000 kW |
|--|--|--|
| | | |
| Requirements | Tra | ining Requirements (Submit copies of training certificates) |
| Age – 20 years | | Basic Safety Training |
| Submit copy of passport | | Advanced Firefighting |
| Meet Requirements for OICEW | | Chief Engineer between 750&3000 kW Course |
| o 6 months sea-going plus 30 months training | | Proficiency in survival craft |
| and education with completed TRB for III/1 | | Proficiency in medical first aid+ |
| sea time | | Ship Security Officer Training |
| Sea service | | |
| o 24 months sea service with at least 12 months as a engineering officer ona vessel between 750 & 3000 kW propulsion power | | |
| Submit letter from Company/Vessel or copies of pages from discharge book(s) Dominica Application and Physical Exam Ensure application is complete Include copy(s) of any previously or currently held licenses or Certificates of Competency | | dedical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for ons in Charge of Medical Care required for those designated to take charge of medical care on board ship. |
| | Requirements Age – 20 years Submit copy of passport Meet Requirements for OICEW heat Requirements f | Requirements Age – 20 years Submit copy of passport Meet Requirements for OICEW 6 months sea-going plus 30 months training and education with completed TRB for III/1 sea time Sea service 24 months sea service with at least 12 months as a engineering officer ona vessel between 750 & 3000 kW propulsion power Submit letter from Company/Vessel or copies of pages from discharge book(s) Dominica Application and Physical Exam Ensure application is complete Include copy(s) of any previously or currently |

| REG: III/3 Second engineer officer on ships powered by main propulsion machinery between 750 & 3000 kW | | |
|---|---|--|
| General Requirements Age – 19 years Submit copy of passport Meet Requirements for OICEW 6 months sea-going plus 30 months training and education with completed TRB for III/1 sea time Sea service 12 months sea service as Assistant Engineer or Engineer Officer on vessel between 750 & 3000 kW propulsion power Dominica Application and Physical Exam Ensure application is complete Include copy(s) of any previously or currently held licenses or Certificates of Competency | Training Requirements (Submit copies of training certificates) □ Basic Safety Training □ Advanced Firefighting □ 2nd Engineer between 750&3000 kW Course □ Proficiency in survival craft □ Proficiency in medical first aid+ □ Ship Security Officer Training Note: Qualified 2nd Engineer officers of 3,000 kW or more may serve as chief engineer on vessels less than 3,000 kW, provided that not less than 12 months of sea service was served as an engineer officer in a position of responsibility and certificate is so endorsed + Medical First Aid Proficiency course required for those designated to provide medical care on board ship. Proficiency for Persons in Charge of Medical Care required for those designated to take charge of medical care on board ship. | |
| REG: III/6 Electro-technical officer | | |
| General Requirements ☐ Age – 18 years ☐ Sea Service: ☐ 12 months combined workshop and skills ☐ training and at minimum 6 months approved ☐ sea service with completion of the Training ☐ Record Book OR ☐ 36 months of combined workshop and skills ☐ training and approved seagoing service of ☐ which not less than 30 months is in the engine ☐ department; ☐ 1/3 of sea service shall be on vessels of 750 ☐ kW or more propulsion power. ☐ Completed approved education and training meeting ☐ competences of A-III/6 of STCW Code; ☐ Approved training course ☐ Meet the standards of competence in A-VI/1, Par. 2; ☐ Section A-VI/2 Par. 1-4; Section A-VI/3, Par. 1-4; ☐ and Section A-VI/4, par. 1-3 of the STCW Code ☐ Approved training courses ☐ Dominica Application and Physical Exam ☐ Ensure application is complete ☐ Include copy(s) of any previously or currently ☐ held licenses or Certificates of Competency | Training Requirements (Submit copies of training certificates) Safety Familiarization Training | |

SPECIAL QUALIFICATIONS

REG: V/1-1.3 Masters, Chief Engineers, Chief Mates, 2nd Engineer and persons with immediate Responsibility on Oil **Tankers General Requirements Training Requirements** (Submit copies of training certificates) ☐ Sea service: Have at least 3 months sea ☐ Advanced Tanker or Tanker PIC course appropriate to DL or DG service on tankers, OR ☐ Min. 1 month supervised sea service on < 3,000 GT tanker with less than 72 hour voyage durations and knowledge gained equal to that of a normal 3 mth service AND Appropriate experience to type of tanker served.

Masters, Chief Engineers, Chief Mates, 2nd Engineer and persons with immediate Responsibility REG: V/1-1.5 **Chemical Tankers**

Training Requirements (Submit copies of training certificates) **General Requirements** ☐ Sea service: Have at least 3 months sea ☐ Advanced Tanker or Tanker PIC course appropriate to Chemical service on tankers. OR ☐ Min. 1 month supervised sea service on < 3,000 GT tanker with less than 72 hour voyage durations and knowledge gained equal to that of a normal 3 mth service AND Appropriate experience to type of tanker served.

REG: V/1-2.3 Masters, Chief Engineers, Chief Mates, 2nd Engineer and persons with immediate Responsibility on

Liquefied Gas Tankers General Requirements Training Requirements (Submit copies of training certificates) ☐ Sea service: Have at least 3 months sea □ Advanced LG Tanker or Tanker PIC course service on tankers, OR ☐ Min. 1 month supervised sea service on < 3,000 GT tanker with less than 72 hour voyage durations and knowledge gained equal to that of a normal 3 mth service AND Appropriate experience to type of tanker served.

| REG: V/2 Masters, Chief Engineers, Chief Mates, 2 nd Engineer and persons with immediate Responsibility on Passenger Vessels | | |
|---|---|--|
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) | |
| □ Immediate responsibility for embarking/disembarking pssgrs, loading/ discharging/securing cargo, or closing hull openings must complete approved training in: | □ Passenger Safety □ Cargo Safety □ Hull Integrity □ Crisis Management and Human Behavior | |
| REG: V/1-1.1 Officers and Ratings on Oil or | Chemical Tankers with specific duties (Basic) | |
| REG. WITTER Officers and Ratings of Off of | Chemical rankers with specific duties (basic) | |
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) | |
| □ Sea service: Have at least 3 months sea service on tankers, OR □ Complete an approved tanker familiarization course (A-V/1), OR □ Min. 1 mth supervised sea service on < 3,000 GT tanker with less than 72 hour voyage durations and knowledge gained equal to a normal 3 mth service | □ Tanker Familiarization DL course | |
| | | |
| REG: V/1-2.1 Officers and Ratings on Liquefie | ed Gas Tankers with specific duties (Basic) | |
| General Requirements | <u>Training Requirements</u> (Submit copies of training certificates) | |
| Sea service: Have at least 3 months sea service on tankers, OR Complete an approved tanker familiarization course mting A-V/1, OR Min. 1 mth supervised sea service on < 3,000 GT tanker with less than 72 hour voyage durations and knowledge gained equal to that of a normal 3 mth service | □ Tanker Familiarization LG course | |
| | | |
| REG: V/2 Officers and Ratings and other per | sonnel on Passenger Ships (Basic) | |
| General Requirements □ Designated on muster lists to assist passengers with emergency situations must complete Crowd Management training spec. in A-V/2 par. 1 prior to being assigned duties □ Having specific duties on board, must complete vessel familiarization training specified in A-V/2 par. 2 prior to being assigned duties □ Providing direct services to passengers must complete training in communication and life-saving procedures specified in A-V/2 par. 3 | Training Requirements (Submit copies of training certificates) □ Crowd Management Training □ Vessel Familiarization □ Communication □ Life-saving procedures | |