

# TRAINING SHIP RAHAMAN

REV. NO. 02  
REV. DATE: 08/2013

STCW 2010 : RFRH: FPFF / AFF / PST / PSC& RB

TSR: ALL:APLC:15  
Pg. 1 of 2

## APPLICATION FORM



PASSPORT  
SIZE PHOTO

COURSE : \_\_\_\_\_

DURATION FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME OF APPLICANT (BLOCK LETTERS) \_\_\_\_\_

SURNAME FIRST MIDDLE

NATIONALITY \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

(DD/MM/YYYY)

C. D. C. NO. \_\_\_\_\_ PASSPORT NO. \_\_\_\_\_

INDIAN NATIONAL DATABASE (INDos No.) \_\_\_\_\_

GRADE / CERT. OF COMPETENCY No. \_\_\_\_\_

RANK / CATEGORY OF CANDIDATE \_\_\_\_\_

**FPFF / AFF / PST / PSC& RB 1995** CERTIFICATE NO: \_\_\_\_\_

DATE OF ISSUE: \_\_\_\_\_ ISSUED BY (NAME OF INSTITUTE): \_\_\_\_\_

SHIPPING COMPANY \_\_\_\_\_

### DECLARATION :

I HEREBY INDEMNIFY THE SMSW FOUNDATION, ITS CAPTAIN SUPERINTENDENT AND ITS OFFICERS FROM ANY CLAIM WHATSOEVER ARISING FROM PERSONAL INJURY, DEATH, SICKNESS OR ANY OTHER HARM SUFFERED BY ME AS A RESULT OF MY UNDERGOING THE SAID COURSE. I CONSENT TO ANY EMERGENCY MEDICAL TREATMENT WHICH MIGHT BE NECESSARY, AND TO PAY ALL CHARGES CONNECTED THEREWITH TO THE FOUNDATION AND IN THE EVENT OF MY SUSTAINING ANY INJURY OR ILLNESS DURING THE PERIOD OF MY TRAINING AT 'T.S. RAHAMAN' WHICH MAY WARRANT HOSPITALISATION. I OR MY NEXT OF KIN / RELATIVE WHOSE NAME AND ADDRESS IS MENTIONED BELOW SHALL BEAR IN FULL, ALL THE EXPENSES INCURRED FOR MY HOSPITALISATION BEFORE MY DISCHARGE FROM THE HOSPITAL, AND ABSOLVE SMSW FOUNDATION FROM ANY FINANCIAL OR OTHER RESPONSIBILITY, WHATSOEVER FOR THE SAID TREATMENT.

NAME, ADDRESS & TELEPHONE NO. OF NEXT OF KIN / RELATIVE : \_\_\_\_\_

\_\_\_\_\_

E-MAIL: \_\_\_\_\_ PIN: \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

### THE FOLLOWING DOCUMENTS ARE HERE WITH ATTACHED :

1. ORIGINAL RECEIPT TOWARDS COURSE FEES PAID
2. ORIGINAL & PHOTOCOPY OF ALL DOCUMENTS REQUIRED FOR ADMISSION AS GIVEN AT THE BACK

SIGNATURE OF CANDIDATE : \_\_\_\_\_ DATE : \_\_\_\_\_

### FOR OFFICE USE ONLY

FEES RECEIVED : YES / NO \_\_\_\_\_ RECEIPT NO. \_\_\_\_\_ DATE \_\_\_\_\_ PAID AT \_\_\_\_\_

RESIDENTIAL / NON RESIDENTIAL \_\_\_\_\_ CERTIFICATE NO. \_\_\_\_\_

SIGNATURE OF BOOKING CLERK \_\_\_\_\_

**CHECKLIST FOR :TSR/FPFF/PSTRFRH  
CONDITIONS FOR ADMISSION.**

- 1.ALL SEAFARERS/PROSPECTIVE SEAFARERS .
- 2.IDENTITY DOCUMENT
- 3.STCW 1995 FPFF/PST CERTIFICATE .
- 4.MEDICAL FITNESS CERTIFICATE FROM A D.G.S . APPROVED DOCTOR ( CERTIFICATE SHOULD NOT BE MORE THAN 1 MONTH OLD ON DATE OF COMMENCEMENT OF THE COURSE ).
5. 2 PASSPORT SIZE PHOTOGRAPHS.
6. INDOS

CHECKED BY \_\_\_\_\_

**CHECKLIST FOR : TSR/PSC&RB RFRH:  
CONDITIONS FOR ADMISSION.**

- 1.ALL SEAFARES WITH ATLEAST 6 MONTHS SEA SERVICES.
- 2.PP/CDC
- 3.PST 2010 RFRH CERTIFICATE & PSC&RB 1995 CERTIFICATE .
- 4.MEDICAL FITNESS CERTIFICATE FROM A D.G.S . APPROVED DOCTOR ( CERTIFICATE SHOULD NOT BE MORE THAN 1 MONTH OLD ON DATE OF COMMENCEMENT OF THE COURSE ).
5. 2 PASSPORT SIZE PHOTOGRAPHS.
6. INDOS

CHECKED BY : \_\_\_\_\_

**CHECKLIST FOR :TSR/AFFRFRH  
CONDITIONS FOR ADMISSION :**

1. ALL SEAFARERS WITH ATLEAST 6 MONTHS SEA SERVICE .
2. PP/CDC
3. AFF 1995 CERTIFICATE
4. MEDICAL FITNESS CERTIFICATE FROM D.G.S. APPROVED DOCTOR (CERTIFICATE SHOULD NOT BE MORE THAN 1 MONTH OLD ON DATE OF COMMENCEMENT OF THE COURSE)
5. 2 PASSPORT SIZE PHOTOGRAPHS
6. INDOS

CHECKED BY \_\_\_\_\_

**ABBREVIATIONS :-**

FPFF RFRH :- FIRE PREVENTION &amp; FIRE FIGHTING REFRESHER .

PST RFRH :- PERSONAL SURVIVAL TECHNIQUES REFRESHER .

AFF RFRH : ADVANCE FIRE FIGHTING REFRESHER .

PSC&amp;RB RFRH : PROFICIENCY IN SURVIVAL CRAFT &amp; RESCUE BOAT REFRESHER .

D.G.S :- DIRECTOR GENERAL OF SHIPPING .

TSR :- TRAINING SHIP "RAHAMAN".

INDOS: INDIAN NATIONAL DATA BASE OF SEAFARERS