



ΚΥΠΡΙΑΚΗ ΔΗΜΟΚΡΑΤΙΑ
REPUBLIC OF CYPRUS

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|---|--|--------------------|
| ΥΦΥΠΟΥΡΓΕΙΟ ΝΑΥΤΙΑΙΑΣ SHIPPING DEPUTY MINISTRY | ΕΚΔΟΣΗ/ΑΝΑΝΕΩΣΗ/ΑΝΤΙΚΑΤΑΣΤΑΣΗ ΠΙΣΤΟΠΟΙΗΤΙΚΟΥ ΕΠΑΡΚΕΙΑΣ/ΒΕΒΑΙΩΣΗΣ ΕΚΠΑΙΔΕΥΣΗΣ/GMDSS ISSUE / RENEWAL / REPLACEMENT OF CERTIFICATE OF PROFICIENCY/DOCUMENTARY EVIDENCE/GMDSS | Σελ. 1 / 2 Page |
|---|--|--------------------|

| | | |
|-----|---|---------|
| 1. | Όνομα / Name | |
| 2. | Επίθετο / Surname | |
| 3. | Ημερομηνία Γεννήσεως (ηη/μμ/χχχχ) Date of Birth (dd/mm/yyyy) | |
| 4. | Τόπος Γεννήσεως (μόνο η Χώρα) Place of Birth (Country only) | |
| 5. | Εθνικότητα / Nationality | |
| 6. | Αριθμός Διαβατηρίου / Passport No. | |
| 7. | Αρ. Τηλεφώνου/ Telephone no. | |
| 8. | Αρ. Βιβλιάρου Ταυτότητας και Ναυτικής Υπηρεσίας Ναυτικού Seafarers Identification and Sea Service Record Book No. | CY..... |
| 9. | Ημερομηνία λήξης Πιστοποιητικού Ιατρικής Εξέτασης (ηη/μμ/χχχχ) Expiry date of Medical Examination Certificate (dd/mm/yyyy) | |
| 10. | Αρχή Έκδοσης Πιστοποιητικού Ιατρικής Εξέτασης (Χώρα) Medical Examination Certificate Issuing Authority (Country) | |

Παρακαλώ σημειώστε στην κατάλληλη στήλη του πιο κάτω πίνακα κατά πόσον αφορά πρώτη έκδοση (I), ανανέωση (RN) ή αντικατάσταση (RPL)

Please mark in the appropriate left column whether the application is for first issuance (I), renewal (RN) or replacement (RPL)

| ΑΙΤΟΥΜΕΝΑ ΠΙΣΤΟΠΟΙΗΤΙΚΑ / REQUESTED CERTIFICATE | I | R | RPL |
|---|---|---|-----|
| 363- Certificate for GMDSS General Operator* | | | |
| 364- Certificate for GMDSS Restricted Operator* | | | |
| 308- Certificate for ARPA | | | |
| 309- Certificate of Proficiency Ratings forming part of a Navigational Watch (Reg. II/4) | | | |
| 323- Certificate of Proficiency Rating forming part of an engineering Watch (Reg. III/4) | | | |
| 297- Certificate of Proficiency in Basic Training | | | |
| 304- Certificate of Proficiency in Survival Craft and Rescue Boats other than fast rescue boats | | | |
| 307- Certificate of Proficiency in Fast Rescue Boats | | | |
| 306- Certificate of Proficiency in Advance Fire Fighting | | | |
| 305- Certificate of Proficiency in Medical First Aid | | | |
| 303- Certificate of Proficiency in Medical Care on board | | | |
| 863- Certificate for personnel on board Passenger Ships 1. SAFETY TRAINING 2. CROWD MANAGEMENT 3. CRISIS MANAGEMENT 4. PASSENGER SAFETY / CARGO SAFETY | | | |
| 823- Certificate of Proficiency in Advance training for Chemical Tanker cargo operations | | | |
| 844- Certificate of Proficiency in Advance training for Liquefied Gas Tanker cargo operations | | | |
| 843- Certificate of Proficiency in Advance training for Oil Tanker cargo operations | | | |
| 846- Certificate of Proficiency in Basic training for Liquefied Gas Tanker cargo operations | | | |
| 845- Certificate of Proficiency in Basic training for Oil and Chemical Tanker cargo operations | | | |
| 443- Certificate of Proficiency for Ship Security Officers | | | |

| ΑΙΤΟΥΜΕΝΑ ΠΙΣΤΟΠΟΙΗΤΙΚΑ / REQUESTED CERTIFICATE | I | R | RPL |
|---|---|---|-----|
| 564- Certificate for ECDIS training* | | | |
| 563- Certificate for BRM training* | | | |
| 565- Certificate for ERM training* | | | |
| 706- Certificate of Proficiency for security awareness without designated security duties | | | |
| 703- Certificate of Proficiency for security awareness with designated security duties | | | |
| 847- Certificate of training in marine environmental awareness | | | |
| 905- Certificate of training for high voltage installations* | | | |
| 803- Certificate of Proficiency for Electro technical rating | | | |
| 906- Certificate for Special Basic Training for Coastal Voyages | | | |

An application it is hereby submitted for the issuance of above mentioned certificate (s). The application is supplemented with the supporting documents noted in the check below.

.....
Applicant's Signature

.....
Date

| | Supporting documents | check | |
|----|--|-------|--|
| 1. | Copy of certificate of training issued by an approved Training School | | |
| 2. | Copy of Passport | | |
| 3. | Copy of a valid medical fitness certificate | | |
| 4. | Two photographs. | | |
| 5. | Payment 50 € for each certificate | | |
| 6. | In case of renewal of Certificate a copy of the expired Certificate. For revalidation of the certificates with an * approved seagoing service of twelve months in total during the preceding five years or three months in total during the preceding six months immediately prior to revalidating is required. | | |
| 7. | In case of replacement of a Certificate a declaration signed by the applicant stating the circumstances under which the loss or destruction of the certificate has occurred. | | |

Για υπηρεσιακή χρήση / For official use only

SFN:

| ΕΛΕΓΧΟΣ | | ΕΓΚΡΙΣΗ | |
|------------------------------|--|----------------------|--|
| Όνοματεπώνυμο: | | Όνοματεπώνυμο: | |
| Ημερομηνία: | | Ημερομηνία: | |
| ΠΛΗΡΟΙ | | ΔΕΝ ΠΛΗΡΟΙ* | |
| ΥΠΟΓΡΑΦΗ | | ΥΠΟΓΡΑΦΗ | |
| *ΛΟΓΟΣ ΑΠΟΡΡΙΨΗΣ ΤΗΣ ΑΙΤΗΣΗΣ | | | |