Assessment of the on Board Training

| Merchant Marine Academy | |
|--|---|
| Address | |
| | |
| Talanhana na | |
| Telephone no. | |
| Fax no. | |
| email | |
| We hereby confirm that: | |
| Mr./Ms. (full name) Passport number Country of issue Date of expiry | |
| has attended a training for on board | . months and days, from to |
| Туре | |
| Name | |
| Gross Tonnage (GT) | |
| Flag | |
| Propulsion power (Kw) | |
| IMO No. | |
| | assessed using a written exam, or/and oral exam or/and propriate) and has been successfully passed with |
| The on board training record book has been examined and found in order and satisfactory. | |
| The practical training is considered satisfactory and in accordance with the requirements of Section A-II/1 or A-III/1 of the STCW Code. | |
| Signed by | |
| (Name of Assessors (minimum 2)- Stamp-Signature) | |
| | |
| Place and date of issue | |
| | |
| EN05F35/01 | |