



**REPUBLIC OF LIBERIA
OFFICE OF THE DEPUTY COMMISSIONER**

ANNEX 1

APPLICATION FOR OFFICER CERTIFICATE OF COMPETENCE

PART I. PERSONAL DESCRIPTION AND INFORMATION: (Type or print clearly)

1. LAST NAME (FAMILY NAME)	FIRST NAME(GIVEN NAME)	Middle Initial	2. Date of Birth month day year	3. Place of Birth (City and Country)
4. Permanent address (street, city and country).			5. Address to which certificate is to be mailed.	
6. Name and relationship of person to be notified in emergency.			7. Citizenship	8. Height
10. Address of person named in 6 (If same as 4, write "same").			11. Color of hair	12. Color of eyes
			13. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	

PART II. DESCRIPTION OF HIGHEST GRADE LIBERIA AND FOREIGN OFFICER CERTIFICATE NOW HELD, IF ANY

	Grade of Officer Certificate	Certificate No.	Date Issued	Date Expires	Country of Issue
(a) Liberia					Liberia
(b) Foreign					
(c) GMDSS					

COMPLETE ONLY IF NATIONAL OFFICER CERTIFICATE DOES NOT REQUIRE TRAINING AS OUTLINED ON PAGE 4.

TRAINING Name of School and address	Dates Attended		Type of Certificate Received Upon Graduation
	From	To	

PART III. ELIGIBILITY BASIS ON WHICH APPLICATION IS MADE

Complete either A, B or C, whichever is appropriate, by placing an "X" in the proper box.
Applicants for examination are further required to complete Items 14 through 18.

A	I hereby apply for issuance of a Liberian officer certificate in a grade equivalent to my foreign officer certificate described in Part II (b) above. Applicants for engineer certificate must indicate mode of propulsion qualified for and desired: (e.g.: Steam, Motor, Steam & Motor).	
B	I hereby apply for renewal of my Liberian officer certificate described in Part II (a), above.	
C	I hereby apply for examination in the grade of:	

14. The documents indicated below will be submitted by me to the Test Supervisor:
 Seafarer's Book or Card No. Passport No. Liberian Certificate No.

15. Test Center at which examination will be taken (see para. 10 page 4).

16. Date on which will report for examination.

17. Language in which require examination questions.

18.

19. Name of vessel on which now serving (or will join).

PART IV. AFFIDAVIT OF APPLICANT CERTIFICATE CANNOT BE ISSUED UNLESS APPLICANT SIGNS LABEL IN BLOCK #21

I hereby affirm that all information provided by me in this application and its supporting documents and proofs are true and correct to the best of my knowledge and belief; further, that no certificate issued to me heretofore by any Government has ever been revoked or suspended; or, if revoked or suspended, a full explanation of the circumstances is attached hereto and made part of this application.

20. Date of Application	21. Signature of Applicant on Label
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DO NOT WRITE BELOW THIS LINE (For Use of Office of the Deputy Commissioner). STCW 1978 Certificate STCW 1995 Certificate

GMDSS REST.	NWO	M (NT)	EWO	Steam	RTO-S	RT-PHONE	OIM	Date and Initials of Grader
GMDSS GEN.	NWO	MATE (NT)	EWO	Motor	RTO-2	APPROVED	BS	
GMDSS 1st Cl.	CM	CE (NT)	1AE	Steam & Motor	RTO-1	REJECTED	BCO	
GMDSS 2nd Cl.	M	AE (LM)	CE	RADAR OBSRVR	RTO-GENERAL	REJECTED	MS	
							ETO	

