Merchant Shipping Division Ministry of Ports & Aviation

A	pplication	n No.		 	
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C.D.C. APPLICATION

PARTICULARS	OF	APPL	LIC <i>A</i>	NT
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1.1	Name (with surname):			
	Last Name (with initials):			
1.2	Other Names:			
	(Names donated by initials):			
1.3	Address:			
	Tel. No.:			
1.4	Date of Birth: Age:			
1.5	Place and Country of Birth:			
1.6	Citizenship: (By registration or descent):			
1.7	Particulars as per National Identity Card No. and Date:			
	No.: Date of Issue:			
1.8	Particulars as per Passport No. :			
	Date of Issue :			
1.9	Height: Build:			
1.10	Birth marks of other marks, scars:			
1.11	Colour of eyes, hair:			
1.12	2 Name of Next of kin:			
	Address and relationship:			
1.13	B Educational Qualifications:			
1.14	If processing and Certificate of Company indicate its No date of issue and the institution:			
1.15 Whether you are engaged in a permanent employment in Public / Private Sector Institution:				
	(If engaged in a permanent employment, Certificate should be produced to the effect that			
	you could be released).			

Contd. 2/

1.16 Copies of following documents are attached:			
a . Birth Certificate			
b. Educational Certificates, Gramasevake Certificate, if available.			
c . National Identity Card			
d . Passport			
e . Medical Certificate (From approved Doctor)			
f. Wages Sheet and other document, if necessary,			
g . Services Certificate or Testimonials			
h. Police report, if necessary			
I do hereby declare that the above particulars are true and the documents mentioned form 1-15 ware produced by me. Date:			
Signature of Applicant			
For Office Use only.			
1.17 I hereby certify that the particulars given in terms 1.1 to 1.14 have been compared with			
originals of certificate and found correct. Photo copies have been initiated.			
Date :			

DDMS (N) /G.E.S.S

CINES/MSTI/NDT/TTI/NIFNE/Juliston, Trainee Submitted for your recommendation please.

A.S.O.

Signature of Officer Receiving Applications.

DDMS (A)

Submitted for your approval please.

A.S.O.