

<u>MSS</u> <u>EXAMINATION</u> <u>UNIT</u>	Checklist for CoC Revalidation Second Engineer Officer	<u>Foam .No : CL-24</u> <u>Date of Issue: 2017.03.16</u> <u>Rev. No: 00</u> <u>Rev. Date:</u> <u>Reviewed by : MR</u> <u>Approved by : DGMS</u>
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Check list for the Enclosures of the personal file

Second Engineer Officer (unlimited)

Name of Applicant:

Index No. : **COC No:**.....

Documentation for Eligibility	Tick	No of pages
01) Copy of Pass Port (if renewed)	<input type="checkbox"/>	<input type="checkbox"/>
02) Copy of CDC Pages (For Sea time Verification)	<input type="checkbox"/>	<input type="checkbox"/>
03) Copy of Medical Fitness Cert.	<input type="checkbox"/>	<input type="checkbox"/>
04) Copies of Testimonials for Sea Service	<input type="checkbox"/>	<input type="checkbox"/>
05) Application for Revalidation with receipt of Fee	<input type="checkbox"/>	<input type="checkbox"/>
06) Basic Training (one or four certificates + COP)	<input type="checkbox"/>	<input type="checkbox"/>
07) Proficiency in Advanced Fire Fighting	<input type="checkbox"/>	<input type="checkbox"/>
08) PSCRB other than fast rescue boat	<input type="checkbox"/>	<input type="checkbox"/>
09) Proficiency in Medical First Aid	<input type="checkbox"/>	<input type="checkbox"/>
10) Ship Security Officer	<input type="checkbox"/>	<input type="checkbox"/>
11) Preparatory Course/Revalidation Course	<input type="checkbox"/>	<input type="checkbox"/>
12) High Voltage –Management Level (Optional)	<input type="checkbox"/>	<input type="checkbox"/>
13) Remarks (if any)	<input type="checkbox"/>	<input type="checkbox"/>
i).....		
ii).....		
iii).....		
iv).....		

14) No. of pages included

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Applicant's signature & Date

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Authenticated by AMTI & Date

Official Use