

Merchant Shipping Secretariat Ministry of Ports & Shipping

MSS

Application for ship's Cook Proficiency Certificate

	1.	Name in Full:		• • • • • • • • • • • • • • • • • • • •					
	2.	Address:							
	3.	Date of Birth:				. NIC No:			
	4.	Telephone No : Mobile:			Residence	ce:			
	5.	C.D.C No :	Dat	e of issue:		Date of Expiry :			
	6.	Passport No:	Date	e of issue:		Date of Expiry:			
	7.	7. Profesional Certificates held if Any:							
	8.	Ship's cook course followed (MLC	5) :	• • • • • • • • • • • • • • • • • • • •					
	9.	Institute (8.) attended	:						
	10.	Date (8.) commenced/completed	:		• • • • • • • • • • • • • • • • • • • •				
	11.	Certificate No. of (8.)	:						
	12.	Receipt No. of cash paid	:						
<u>N.J</u>	B Ev	very Candidate will be su	<u>bject</u>	to an Ora	l Exam	<u>ination</u>			
Date	e:					Signature of the applicant			
		FFICE USE ONLY (Pleas	e tick	(✓) appro	priate b	<u>oox)</u>			
Do	cum	nents filed:		Ц	Sta	aff signature & Name			
We	ebsit	e updated	:						
					ΙΊ	assistant signature			
Sig	natı	are of verified Officer							
Na	me:								
Da	te:								

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