Application Form for Watch keeping
(for candidates issued with CDC on compassionate grounds)

1. Full name ________________________________________________________________
   (Block letter)
2. Communication Address ____________________________________________________
3. Date of birth______________Mobile No.________________________________________
4. Mobile No.____________________
5. Email id_______________________________________
6. C.D.C. number______________ Place of issue__________________ Dated______________________
7. INDOS Number__________________
8. Eligibility letter from CMMI / IMEI FCs /MMD ___________________________________
9. Last appeared Date (if wants to reappear)______________________________
10. Please mention your attempt (Fresh / 2nd or 3rd attempt)________________________
11. Exam for: (Please write YES or NO)
   
   Navigational Watch
   Engine room watch

---------------------------------------------For Office use only---------------------------------------------

CANDIDATE ROLL NO: ______________________
(In case of repeater candidate, please insert slash mark (/) after the roll no & write the number of attempt)

Date: ____________________ Signature of Candidate ____________________ In-Charge Examination ___________

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Please tear it away from here

BOARD OF EXAMINATIONS FOR SEAFARERS TRUST
ADMIT CARD –Navigational / Engine room Watch

Name of the Candidate: _______________________________________________________________

Roll No:____________________ Attempt:_______________________________

CDC No.____________________ Indos No:_____________________________

Navigational Watch
Engine room watch

Signature of the Candidate ____________________ In-Charge Examination ____________________ Signature of COO/AO ____________________