

Board of Examinations for Seafarers Trust, Mumbai

	FORMAT – IV – 001. DATE REV No.
,	BES Code No.
	Roll No.

To put tick ($\sqrt{\ }$) mark for which grade is applied for?

2 nd Class	Engine Si 1st Class	Motor	Syrang	Deck Side	1 st Class	Paste your recent pass port size	Left hand Thumb impression	Right hand Thumb impression
Engine Driver	Engine Driver	engineer's Certificate		Master	Master	photograph (30mm x 40mm)		

Note: Division (A), (B), (C), (D), (E), (F), (G) & (H) of this application form are to be filled by applicant & to be submitted to BES office with candidate's Testimonials and former Certificate, if any.

(A) Candidate Details (Form MUST be filled in CAPITAL LETTERS only)

Name in Full : →									
Father's Name: →									
Nationality -				Educational Qualification-		Male / Female			
DD	•	MM	YY	Place of Birth					
D.O.B.									
Permanent	Ad	dress							
			Dist.	>	State→		PIN→		
Present Ad	dre	ss							
			Dist.	>	State→		PIN→		
Telephone 1	No.				Mobile No.				
email - ID									

(B) Personal Description of the Candidate

Height		Complexion	Colour of	f	Personal mark of peculiarities if any
Meters	Centimetres		Hair	Eyes	

(C) Particulars of all previous certificate (if any)

	"competency" "Service or "RNR	Grade	Where issued	Date of Issue	If at any time cancelled or suspended, state by what Court or authority	Date	Cause

	Day	Mon		nth	Yea	ır		Port	Subjec	et in which	he failed
		stimonia format)		tatement	of Service	given	by emplo	oyer (s	hould be	e attach	ed as
No. of testimo				Particular se	of applic	cant's		Trade in		Initials of	
nials if any	nam e	ship tonnage and	Capacity	Date of commen	Date of terminatio	Le	ength of ser	vice	which employ ed	Remark s	verifie
		B.H.P		cement	n	Years	Months	Days	_		
		n Words									
ı vı u.	1. \$	School Lea	e of the fo l aving Certi	_	f-attested ce C Certificate	[]	of Date	of Birth		
(No purp form sent furth	1. S 2. I laration tice.—. ose of c I do are conwith th	ch any one School Lea Birth Certi on to be m Any persor obtaining for the hereby de prect and training form are	e of the following Certificate ade by ap a who make or himself of the best true and ge	plicant es, or procu r for any oth ne particular st of my kno		[[e, or assertificate Division elief, and and signed	ists in mak of compete is (A), (B), I that the part I by the per	ing any incy is lia (C), (D), pers enuisons who	false repre ble to proso (E), (F), (Conerated in se names a	ecution.) G) and (H) Division (appear on t	of this F) and hem. I

(D) Applying for the grade of examination (for Certificate)

Grade

Competency (Deck or Engine)

(I)) Details of Asses	ssment fees (Make	DD in favour of 'BE	S Trust Examination Fees AC')
	DD No.	DD Date	Amount of DD	Name of Bank with Branch Name

DD No.	DD Date	Amount of DD	Name of Bank with Branch Name

For Official Use Only:

Remark	Eligible / Not Eligible	
Signature of IV staff of BES:	Signature of (EC- IV) OF BES:	
Date:	Date:	

Application No.	Roll No. (for BES Office)
Name of the Candidate	
Grade Applied for	

Note: - To be filled by an examiner.

Date & Pla	ace of Examination	'Passed 'or 'Failed'	Specify Rank for which he passed	
Date	Place			
	Cochin		Rank Passed	
			Examiner's Signature	
			Date:	

hereby certify that the particulars contained above are correct. This form and the Testimonials shall be retained in the office for a period of 03 years.
Dated this day of

Chief Co-ordinator (IV Examination) Board of Examination for Seafarers Trust, Navi Mumbai