



# **Board of Examinations for Seafarers Trust**

FORMAT-IV-02-Rep-MMB

Dated 03.08.23

Rev No-00

## **Application For Examination Under**

### **Maharashtra Maritime Board (MMB)-Repeater**

**Application No-** \_\_\_\_\_

**Roll No-** \_\_\_\_\_

**Notes: -(i)** Before filling in the required particulars, the candidate should read carefully the Notice, Eligibility Criteria and Declaration in (6).

**(ii)** Entire form is to be filled in "**CAPITAL LETTERS**" only.

**1) Certificate now required (Grade applying for)**

a) Competency (Deck/Engine) \_\_\_\_\_

b) Grade \_\_\_\_\_

Paste your recent color photographs on white background  
*(Fits within the box)*

**2) Details of the Candidate**

a) Name \_\_\_\_\_

b) Nationality \_\_\_\_\_

Signature Of Candidate

c) Educational Qualification \_\_\_\_\_ d) Date of Birth DD /MM /YYYY

e) Permanent Address \_\_\_\_\_

Dist \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

f) E-mail id \_\_\_\_\_ g) Mobile No \_\_\_\_\_

**3) Tick mark (✓) & write Preferred language for appearing Examination**

(Marathi, Hindi or English) \_\_\_\_\_

**4) Details of Last Examination appeared (Tick ✓ Written/Oral)**

a) Date of Last Examination \_\_\_\_\_ Failed in  Written  Oral

b) Roll Number of Last Examination \_\_\_\_\_

**5) List of documents to be Attached (In case the validity is expired, which submitted earlier)**

a) Self-attested copies of Modular Safety and Security Courses.

b) Original eye sight test & colour vision test by **DG approved** medical examiner.

c) Self-attested copy of valid Passport/Original Police Verification Certificate/No Objection Certificate (Govt. Employee)

d) Self-attested photo copy of **the ID Proof (Issued by Government)**

**6) Declaration**

I do here by, declare that, particulars contained in the application are correct and true to the best of my knowledge and belief, and that the attached documents are genuine and signed by the person whose names appear on them. I make this declaration consciously believing it to be true.

Date \_\_\_\_\_

Place \_\_\_\_\_

**Signature of the Applicant**

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**7) Documents & Credential of Candidate verified (BES)**

Signature of Verifier/Executive Officer (IV) \_\_\_\_\_

**8) For Office Staff Use Only**

Name of the Candidate \_\_\_\_\_

Candidate's Roll No \_\_\_\_\_

Grade Appearing \_\_\_\_\_

**9) For Examiner's Use Only**

**Note:** The Examiner should fill up following field and, in all cases, as soon as possible forward this paper to the Chief Co-ordinator IV examination, Navi Mumbai. If the applicant passes his Testimonials and previous Certificate if any must be sent with this paper to the Co-ordinator of IV examination

**Part (A)  
Written Examination Result**

Date of Written Examination \_\_\_\_\_

Written Examination Result (**Pass or Fail**) \_\_\_\_\_

**Part (B)  
Oral Examination Result**

Date of Oral Examination \_\_\_\_\_

Oral Examination result (**Pass or Fail**) \_\_\_\_\_

Examiner's Signature & Date \_\_\_\_\_

**10) For Examination Co-ordinator's Use Only**

I hereby, certify that the particulars contained above are correct. The above-named candidate has been Declared **FINALLY (Pass or Fail)** \_\_\_\_\_

(Signature & Name) \_\_\_\_\_

Date \_\_\_\_\_ (Date of Declaration of Result)

In-Charge, IV/Port Examination

**(Board of Examination for Seafarers Trust, Navi Mumbai)**