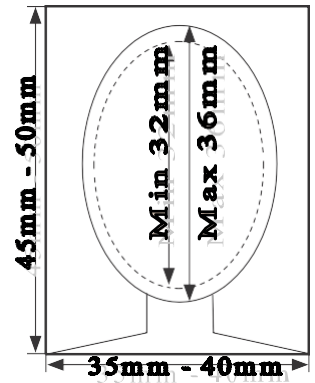




MARITIME SAFETY AUTHORITY OF FIJI
APPLICATION FOR JETTY MASTER

Please ensure your signature fits inside the box

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Service Required (Please tick appropriate box (Please use BLOCK LETTERS))

Appointment as Jetty Master	
Application for the 2.5 year verification	

Class of Certificate for which this application applies		Seafarer Registration No. <i>(if known)</i>	
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Applicant's Details

Family Name		Given name(s)	
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Postal Address	
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Residential Address <i>(if the same postal address write 'as above')</i>	
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Telephone	Email	Date of Birth	Place of birth <i>(country)</i>

Height <i>(cm)</i>	Colour of eyes	Colour of hair	Gender	Male/Female
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Particulars of Marine Certificates held

No.	Class	Issuing Authority	Date of issue	Date of Expiry	Endorsements	Ever suspended or Cancelled <i>(state why)</i>

Seafarer employment Record Book Details

Date Issued		Place Issued		Book No.	
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Details of Eyesight Test *(Original Certificate to be sighted)*

Date Issued	Place Tested	Results	Certificate No.
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Certificate of Medical Fitness *(Original Certificate to be sighted)*

Date Issued		Doctor		Telephone	
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Applicant's Declaration

I..... (name in BLOCK LETTERS), hereby declare that the particulars entered in this application are correct and true to the best of my knowledge and belief, and that the Certificate and Testimonials submitted with this application for verification of particular entries are true and genuine documents given and signed by the persons whose names appear on them. I understand that some or all of the information provided on this form may be disclosed to Government Authorities.

Applicant's Signature	Taken and declared before me at..... This.....day of.....20.....
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Signature <i>(Justice of the Peace/Commissioner of Oaths)</i>	Name <i>(please print)</i>
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Abbreviations

Area of operation	Type	Principal Duties	Official Use Only
UL- Unlimited NC- Near Coastal TW- Territorial Waters IS- Inshore SW- Sheltered Waters PA- Pilotage Areas	C- Commercial Vessel FV- Fishing Vessel RP- Recreational N- Naval R- Rescue T- Tankers PC- Pass/ Cargo P- Passenger RR- RO- RO HS- High Speed Craft CS- Cable NA- Navais O- Others (<i>please specify</i>) PC- Pleasure Craft	M- Master CM- Chief Mate 2M- Second Mate 3M- Third Mate WKD- Watchkeeper Deck DR- Deck Rating AB Deck IR- Integrated Rating CE- Chief Engineer 2E- Second Engineer 3E-Third Engineer WKE- Watchkeeper Engineer ER- Watch Rating Engine AB Engine P- Pilot O- Others (<i>Please specify</i>)	Total Service:..... Commercial:..... Last 5 years:..... >3000GT/kW..... <3000GT/kW..... <1600GT/1500kW..... <5000GT/750kW..... <80GT/500kW..... <20GT 250 kW..... Seetime Approved: Y/N Certificate: Sign: Date/Stamp:

Statement of Service Ashore (ENGINEERS)

No. of Testimonials	Name & Address of Firm & workshop	Nature of Business	Nature of work done by applicant	From	To	No. of Days	Remarks

Course Details (*including approved Training Institutions and associated specialist courses*)

Course Title	Training Institution	Date of issue

Guide to completing this Application

Application for Seetime Assessment

- Complete pages 1 & 2 of this application
- The following must be lodged with this application
 - ∞ Two (2) passport sized photographs
 - ∞ Proof of Identity (*see note on Proof of Identity below*)
- Provide Record of Service or Statutory Declaration to support seetime claimed

Application for Application for Jetty Master

- Complete pages 1 & 2 of this application
- Application fee of \$250.00
- The following must be lodged with this application
 - ∞ Two (2) passport sized photographs
 - ∞ Result of eyesight test
 - ∞ Seafarers Medical Fitness Certificate (*dated within 1 year of this application*)
Eye sight test certificate
 - ∞ Reference letter from company
 - ∞ Letter of successful completion of training from MSAF
 - ∞ Police Clearance

Application for the 2.5 year verification

- Complete pages 1 & 2 of this application
- Application fee of \$150.00

Other Information

- Notes of the guidance of Candidates and general Syllabus outline for each class of certificate are available from the Qualification & Licensing Division, MSAF, A detailed syllabus for each Class is available for a Fee. Individual course Modules are available at various training establishments for a fee.
- All applications for Seafarers must be addressed to the Chief Executive Officer (MSAF) P.O Box 326, Suva, Fiji.
Telephone: (679) 3315 266 / 3318 188 Fax: (679) 3303 251 / 3313127
email: info@msaf.com.fj

