



Surveyor Application Form

Date of Application	Position	Employment Type
		☐ Full-Time ☐ Part-Time ☐ Contract

Personal Information

Full Name		Nationality
Address		
Phone	Email	DoB
Driving License	☐ No ☐ Yes,	Years of work
Marital Status	☐ Single ☐ Married, number of dependent(s)	

Educational Background

Degree / Course	University / Institute	Year of Graduate	Grade	City

Employment History

Company	Position	Year	Reason for Leaving

Skills & Training

Skill & Training Achievement(s)	Level	Year	Institute

Attach your resume and portfolio to this job application form.

Send it via email or hand it over to **702 Tameem House Office Building, Al Barsha Heights, Dubai, UAE**

- | | |
|--|--|
| ☐ PASSENGER SHIP SAFETY | ☐ IBC CODE |
| ☐ CRUDE OIL WASHING / TANKERS | ☐ BCH CODE |
| ☐ ANTI- FOULING | ☐ HSC CODE |
| ☐ INERT GAS SYSTEMS | ☐ GC CODE |
| ☐ ELECTRICAL SYSTEM | ☐ GRP CONSTRUCTION |
| ☐ AUTOMATIC & CONTROL INSTALLATION | ☐ CALCULATION |
| ☐ HULL | ☐ NATIONAL REGULATIONS |
| ☐ MACHINERY | ☐ ISM CODE |
| ☐ REFRIGERATION MACHINERY INSTALLATION | ☐ ISPS CODE |
| ☐ ALUMINUM CONSTRUCTION | ☐ SOLAS CHAPTER II |
| ☐ STAINLESS STEEL CONSTRUCTION | ☐ SOLAS CHAPTER III |
| ☐ DAMAGE / REPAIRS | ☐ SOLAS CHAPTER IV |
| ☐ ENGINEERING REPAIRS | ☐ SOLAS CHAPTER V |
| ☐ NON-DESTRUCTIVE TESTING | ☐ SOLAS CHAPTER VI |
| ☐ INCLINING TEST | ☐ SOLAS CHAPTER VII |
| ☐ LIFTING APPLIANCES | ☐ SOLAS CHAPTER X |
| ☐ UNDERWATER SURVEY | ☐ SOLAS CHAPTER XII |
| ☐ LOAD LINE SURVEYS | ☐ SOLAS CHAPTER XIII |
| ☐ TYPE APPROVAL | ☐ MODU CODE |
| ☐ DRYDOCKING | ☐ IGC CODE |
| ☐ MAPOL - CHAPTER I | ☐ MLC 2006 |
| ☐ MAPOL - CHAPTER II | |
| ☐ MARPOL - CHAPTER III | |
| ☐ MARPOL - CHAPTER IV | |
| ☐ MARPOL - CHAPTER V | |
| ☐ MARPOL - CHAPTER VI | |

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 +97144580845

 info@rcsclass.org

 www.rcsclass.org

SPECIALITY

3 OF 4

- | | |
|---|--|
| ☐ GAS CARRIER | ☐ PASSENGER SHIPS |
| ☐ PASSENGER HIGH SPEED CRAFT | ☐ BULK CARRIER |
| ☐ CARGO HIGH SPEED CRAFT | ☐ OIL / CHEMICAL TANKERS |
| ☐ MOBILE OFFSHORE DRILLING / PLATFORM UNITS | ☐ OTHER CARGO SHIP |

REGISTERED TRAINING COURSE DETAIL (LIST THE RECENT 10 CERTIFICATIONS)

*provide certificate copies

CERTIFICATE OBTAINED	INSTITUTION	YEAR	ATTACHED DOCUMENT

MEMBERSHIP OF PROFESIONAL INSTITUTION

*indicate from recent experience first

FROM (MM-YYYY)	TO (MM-YYYY)	NAME OF ORGANIZATION

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SEA TIME EXPERIENCE

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*indicate from recent experience first

FROM (mm-yyyy)	TO (mm-yyyy)	POSITION	VESSEL NAME

NEAREST PORT			
REGIONAL REPRESENTATIVE			
PLACE		DATE	
APPLICANT NAME			
APPLICANT SIGNATURE			

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