

THE UNITED REPUBLIC OF TANZANIA MINISTRY OF WORKS AND TRANSPORT TANZANIA SHIPPING AGENCIES CORPORATION TASAC



ISO 9001:2015 CERTIFIED

APPLICATION FORM FOR CERTIFICATE OF COMPETENCY (COC)

A. NATURE OF APPLICA	TION			
Tick as appropriate (√)	New	Revalidation	Replacement	t
*All particulars to be in CAPIT	AL LETTERS			
B. PERSONAL DETAIL	LS			
First Name	Middle 1	Name	Last Name	
Nationality:	Date of	Birth: / /	Place of Birth:	
Pysical Address:	Phone:		Email:	
Color of Hair:	Color of	Eyes:	Complexion:	
Height (cm):	Weight	(kg):		
Distinguishing Mark (if any):				
NEXT OF KIN ADDRESS				
Name:	Relation	ıship:	Phone:	
C. Category of certific	ate required (Ti	ck as appropriate)		
Certificates				Tick (□)
Master				
Master on Ships of between 500 a	and 3000gt			-
Master (near – coastal) on Ships I	ess than 500gt (NC	V)		
Chief Mate			· /	
Chief Mate on Ships of between				
Officer in charge of a Navigational				
Officer in charge of a Navigational	I watch on ships of I	ess than 500gt (NCV)		
Chief engineer officer				
Second Engineer officer		Internation of Late	750 111/ - 1 10000	
Chief Engineer officer on ships pokW				
Second Engineer officer on ships 3000 kW	powered by main pr	opulsion machinery of b	etween 750 kW and	
Officer in charge of an engineering	g watch on ships po	wered by main propulsion	on machinery of 750 kW	
or more.	9 p . p .		,	
Officer in charge of an engineering than 750 kW. (Domestic)	g watch on ships po	wered by main propulsion	on machinery of less	
Electro technical officer				1
Others (Specify)				<u>l</u>
Canore (Opcony)				

D. Certificate of Competency Previously held (if any)

Grade/Category	Certificate No.	Issuing Authority and Date of issue	If certificate has been cancelled of suspended state:	
			The Authority	
			Date	
			Cause	

E. Relevant Education

S/n	Name of College	Country loity	Year of study	Course pursued	Year of graduation
1					
2					
3					

F. Documents Submitted for Deck Department

1. Documents Submitted for Deck Departme				Сара	city of	Certifica	te applicat	ion	
Documents to Accompany Application	Master	Chief mate	Master GT <3000	Chief mate GT <3000	Officer in charge of a navigational watch	Master, GT <500, NCV	Officer in charge of a navigational watch, GT <500, NCV	Certificate Number	Date of Expiry
Proof of identity	Χ	Χ	Χ	Χ	Χ	Χ	X		
Medical fitness certificate	Χ	Χ	Χ	X	Χ	Χ	X		
Seagoing service testimonials	Χ	Χ	Χ	Χ	Χ	Χ	Х		
On-board training record book					Χ		X		
Previous certificate of competency/proficiency	Χ	Χ	X	Χ		X			
Watchkeeping certificates		Х	Χ	Χ		Χ			
Bridge watchkeeping certificate					X		X		
Certificate of the successful completion of the relevant training course	X	Χ	Х	X	Х	Χ	Х		
Personal Survival Techniques certificate	Χ	Χ	Χ	Χ	Х		Х		
Fire Prevention and Fire Fighting certificate	Χ	Х	Χ	Χ	Х		Х		
Medical first aid certificate	Χ	Х	Χ	Χ	Х		Х		
Elementary First Aid certificate	Χ	Х	Χ	Χ	Х		Х		
Personal Safety and Social Responsibilities certificate	Χ	Х	Х	Χ	Х		Х		
Proficiency in Survival Craft other than Rescue Boats certificate	Х	Х	Х	Х	Х		Х		
Advanced Fire Fighting certificate	Χ	Х	Х	Χ	Х		Х		
Ship Security Officer certificate	Χ	Х	Х	Χ	Х		Х		
Medical care certificate	Χ	Χ	Χ	Х	Χ				

			ı	Capa	city of	Certifica	te applicat	ion	
Documents to Accompany Application	Master	Chief mate	Master GT <3000	Chief mate GT <3000	Officer in charge of a navigational watch	Master, GT <500, NCV	Officer in charge of a navigational watch, GT <500, NCV	Certificate Number	Date of Expiry
GMDSS General Operator Certificate	Х	Х	Х	Χ	Х				
GMDSS Restricted Operator Certificate							Х		
Radar Navigation-operational level certificate	Х	Х	Χ	Χ					
Radar Navigation-management level certificate					Χ	Χ	X		
Electronic Chart Display & Information System (ECDIS) certificate	x	Х	Х	Х	Х	Х	Х		
Security awareness training certificate	Х	Х	Х	Χ	Х	Х	Х		
Bridge Resource Management	Х	Χ	Х	Χ	Х	Χ	Х		
Leadership and Managerial Skills	Х	Х	Х	Χ					
Leadership and Teamwork Skills					Χ	Χ	Х		
Automatic Radar Plotting Aid (ARPA)			Х	Χ	Χ	X	Х		
Automatic Identification System (AIS)	Χ	Χ	Χ	Χ	Х	X	X		

Documents Submitted for Engineering Department

G. Documents Submitted for Er	Capacity of Certificate application										
Documents to Accompany Application	Chief Engineer Officers	Second Engineer Officers	Chief Engineer officer up 3000kW	Second Engineer officer up to 3000 kW	Officer in Charge of an Engineering Watch	Electro-technical Officer	Certificate Number	Date of Expiry			
Proof of identity	X	Х	Х	Х	X	Х					
Medical fitness certificate	X	X	Х	Х	X	Х					
Seagoing service testimonials	X	X	Χ	X	Х	Х					
On-board training record book					Х	Х					
Previous certificate of competency/proficiency	Х	Х	Х	Х							
Watch keeping certificates	Х	Х	Х	Х							
Certificate of the successful completion of the relevant training course	Х	Х	Х	Х	Х	Х					
Personal Survival Techniques certificate	Х	Х	Х	Х	Х	Х					
Fire Prevention and Fire Fighting certificate	Х	Х	Х	Х	Х	Х					
Elementary First Aid certificate	Х	Х	Х	Х	Х	Х					
Personal Safety and Social Responsibilities certificate	X	X	Х	Х	Х	Х					
Proficiency in Survival Craft other than Rescue Boats certificate	Х	Х	Х	Х	Х	Х					
Advanced Fire Fighting certificate	Х	Х	Х	Х	Х	Х					

Medical First Aid certificate	X	X	X	X	Х	X	
Ship Security Officer certificate					Х	Х	
Security awareness training certificate	Х	Х	Х	Х	Х	Х	
Security training for seafarers with designated security duties certificate	Х	Х	Х	Х	Х		
Engine Room Resource Management	X	Х	Х	Х	Х	Х	
Leadership and Managerial Skills	Х	Х	Х	Х	Х	Х	
Leader ship and Teamwork Skills					Х	Х	
High Voltage Management Level	Х	Х	Х	Х			
High Voltage Operational Level					Х	Х	
Others (Specify)							

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render himself liable to penalties.

I hereby declare that	the information filled in this he information filled above.	form is true and correct and TASAC is not liable
Date: / /		Signature:
NOTES:		
Any person who makes	s or assists in making any fa	alse presentation for the purpose of obtaining for

himself or for any other person a Certificate of Competency shall be guilty of an offence, and shall

I. F	OR O	FFICIAI	_ USE	ONLY							
PART I:	VERIF	CATIO	N BY	OFFICER							
Applicati	on for	m subn	nitted	on (date)							
Eligibility	for	issuan	ce of	applied	Certificate	of	Competency	was	granted	on	Regulation
								/	/		

Signature

Name

Date

PART II: PAYMENT DETAILS-CASHIER RECEIVE

Fee payable TZS/USD	Receipt No.	
ate:	Signature of receiving office	er
ART III: REVIEW BY MANAGI	ER SEAFARERS TRAINING AND C	ERTIFICATION
Remarks:		
Name	Signaturo	//
vaille	Signature	Date
RT IV: APPROVAL BY REGI	STRAR	
Details of Certificate issued		
Certificate No.	Capacity	Date of issue
Remarks:		
Name	Signature	//
		Juli
DT V AQUADAW EDGEMEN	T 500 D505/DT 05 05DT/504T5	
RT V: ACKNOWLEDGEMEN	T FOR RECEIPT OF CERTIFICATE	
Received By:	Signature:	Date:/ /
•		
Issued By:	Signature:	. Date://

Attachments:

1. New application:

• For New application attach copy of the following: Statement of Results for Certificate of Competency, Certificate of pass for oral examination, Certificate of proficiency Medical Fitness, Proof of identity (Passport or CDC, SID, National ID, Birth Certificate).

2. Application for revalidation

 For Revalidation attach copy of the following: Statement of Refresher Course, Certificate of proficiency, Medical Fitness, Proof of identity (Passport, CDC, SID or Birth Certificate) and previous original CoC.

3. Application for replacement

 For Replacement attach copy of the following: Application letter, Police Loss Report, Statement of Results for Certificate of Competency, Certificate of pass for oral examination, Certificate of proficiency, Medical Fitness, Proof of identity (Passport, CDC, SID or Birth Certificate) and previous CoC or the damaged CoC.

