



The Maritime Authority of Jamaica

EXM

Application for Written Qualifying Examinations Deck and Engine Departments

SECTION A - Personal Details

		Application No.:	
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Capt	Gender: Female <input type="checkbox"/> Male <input type="checkbox"/>	TRN:	
Surname/Family Name	Christian Name(s) in full	Date of Birth (dd/mm/yyyy)	
Address	Home Address	Mailing Address (if different from home)	
District/Town/City			
Parish			
Postal Code			
Country			
Telephone No.			
Mobile No.			
E-Mail Address(es)			

SECTION B - Application for Written Examination

Capacity	STCW Reg.	Limitations	√
Master	II/2	Ships of 500grt or more, Unlimited	
Master	II/2	Ships between 500grt and 3000grt, Unlimited	
Master	II/3	Ships of less than 500grt, NCV	
Chief Officer	II/2	Ships of 500grt or more, Unlimited	
Chief Officer	II/2	Ships between 500grt and 3000grt, Unlimited	
OiCNW2	II/1	Ships of 500grt or more, Unlimited	
OiCNW	II/3	Ships of less than 500grt, NCV	
AB Deck	II/5	Ships of 500grt or more, Unlimited	

Capacity - Engine	STCW Reg.	Limitations	√
Chief Engineer	III/2	Main propulsion power of 3,000 kW or more	
Chief Engineer	III/3	Main propulsion power of between 750 kW & 3,000 kW	
Second Engineer	III/2	Main propulsion power of 3,000 kW or more	
Second Engineer	III/3	Main propulsion power of between 750 kW & 3,000 kW	
OiCEW	III/1	Main propulsion power of 750 kW or more	
Electro Tech. Officer	III/6	Main propulsion power of 750 kW or more	
AB Engine	III/5	Main propulsion power of 750 kW or more	
Electro Tech Rating	III/7	Main propulsion power of 750 kW or more	

Non-STCW Certifications

Capacity	Limitations 1 (√)		
	Grade/Category 1	Grade/Category 2	Grade/Category 3
Coastal Master			
Boat Master/Engineer			
Coxswain (Specify harbor)			

OFFICIAL USE ONLY

Received: Signature, Date and Time	Receipt No:	
	Supporting Documents Checked	
	Exam Date Assigned	

SECTION C

Examination Subject Selections - *STCW Certifications* Please tick: **I** - Initial; **R** - Re-sit

DECK SUBJECTS	I	R
Cargo Handling, Stowage & Securing		
Electronic Navigation Systems (ENS)		
Magnetic & Gyro Compasses		
Maritime Legislation		
Meteorology		
Ocean & Offshore Navigation		
Ship Construction and Stability		
Ship Manoeuvring & Handling		
Terrestrial and Coastal Navigation (Chartwork)		
Terrestrial and Coastal Navigation (Theory)		
Visual Signalling (Practical)		
Visual Signalling (Written)		
Watchkeeping		
Advance Fire Fighting		
Basic Safety Training		
Emergency Procedures; Search and Rescue		
GMDSS		
Medical First Aid		
Proficiency in Survival Craft 1		
Radar & ARPA Navigation		
Ship Security Awareness		

ENGINE SUBJECTS	I	R
Electrical Engineering		
Electronic & Control Engineering		
Engineering Graphics		
Engineering Science		
Engineering Thermodynamics		
Maritime Legislation		
Operation and Maintenance of Auxiliary Machinery (Engineering Knowledge II)		
Operation and Maintenance of Main Machinery (Engineering Knowledge I)		
Ship Construction and Stability		
Advance Fire Fighting		
Basic Safety Training		
Emergency Procedures; Search and Rescue		
Medical First Aid		
Proficiency in Survival Craft & Rescue Boats		
Ship Security Awareness		

Checklist - The following original documents must be submitted	√ If enclosed
Passport or National identification document	
Proof of Sea Service (Discharge Book Certificates or Testimonial from vessel/company)	
Letter of recommendation or proof of course completion from approved Maritime Training Institute (MTI)	

MAJ Use Only	
Yes	No

For holders of a Certificate of Competency or Boat Master/Engineer Certificate please submit details of the certificate as indicated below:			
Certificate No	Capacity: (Position onboard)	Date of Issue	Country of Issue

SECTION D

Applicant's Signature & Declaration

I declare that the information provided in this application is, to the best of my knowledge, true and complete. I also declare that the documents submitted are genuine, given and signed by the person whose names appear on them. I consent to any processing of the information contained in this application by the MAJ including any processing necessary to establish the authenticity and validity of the issued certificate.

Please sign in the space provided with black or blue ink pen.

Date: _____

¹ other than fast rescue boats unless so stated

Payment Instructions

Payment must be submitted with application.
Payment should be made in Jamaican **or** US dollar **or** wire transfers.

Managers Cheques should be made payable to the "The Maritime Authority of Jamaica".
Cash will only be accepted by direct payment to the cashier at the MAJ's office in Kingston.

The wire transfer payments should be made to:

Outside Jamaica

Jamaica Money Market Brokers Ltd. A/C.# 36022703,
c/o Citibank N.A. 111 Wall Street N.Y. CodeCITIUS33, ABA '21000089'
for further credit to A/C. # 22606324,
Maritime Authority of Jamaica, Kingston.

Within Jamaica

Bank of Nova Scotia Jamaica Limited,
US A/C# 505774993 **or**
JAD A/C# 7616-18

Please tick (√) the appropriate box below to indicate your chosen method of payment. All fees are non-re-fundable.

Cash	JAD	<input type="checkbox"/>	Cheque	<input type="checkbox"/>
	USD	<input type="checkbox"/>		Wire Transfer

Signature: _____

Date _____

Completed Applications should be submitted to:

The Maritime Authority of Jamaica
2nd Floor, The Office Centre Building
12 Ocean Boulevard,
Kingston
Jamaica W. I.

Tel: +1 876 967 1060-5, 967 1087
Fax: +1 876 922 5765
Email: customerservice@jamaicaships.com