



FEDERAL REPUBLIC OF NIGERIA
NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY
SEAFARER'S MEDICAL CERTIFICATE
(NIMASA)

207367



ORIGINAL

This Certificate is issued by the Government of the Federal Republic of Nigeria in compliance with the requirement of Regulation 1.2 standard A 1.2 of the Maritime Labour Convention, 2006 (MLC '06), as amended and the International Convention on Standards for Training, Certification and Watch keeping for seafarers (STCW) 78 as amended.

Surname: ADOGA	Given Names: ABRAHAM EMMANUEL	
Discharge Book No: SSID NO: N061215	Passport No:	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Date of Birth: 29091994	Nationality: Nigerian	

Department: (Tick relevant box)			Rank _____
Deck <input type="checkbox"/>	Engine <input type="checkbox"/>	Catering <input type="checkbox"/>	Rank _____
Other (specify) _____			

Declaration of the recognised doctor

ID checked at the point of examination	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Hearing standards as in STCW A I/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Visual acuity standards as in STCW A-I/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Unaided Hearing satisfactory	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Color vision stbards as in STCW A-I/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Is there any limitation or restriction on fitness? Please specify restriction.	
Date of last colour vision test (dd/mm/yy)	27-11-23		

Visual Aids (tick if worn)	
Spectacles <input type="checkbox"/>	Contact lenses <input type="checkbox"/>

Restrictions Duties: Location/Vessel: Medical/Others:	
--	--

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons onboard?	
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

I have examined the seafarer named above and have found him/her fit for seafaring as below

Medical Fitness Category (tick relevant box)	
1. Fit-No Restriction <input checked="" type="checkbox"/>	2. Fit-subject to restrictions <input type="checkbox"/>

Fit for look-out duty	Deck	Engine	Steward/Others
Fit <input checked="" type="checkbox"/> Unfit <input type="checkbox"/>	Fit <input type="checkbox"/> Unfit <input type="checkbox"/>	Fit <input type="checkbox"/> Unfit <input type="checkbox"/>	Fit <input type="checkbox"/> Unfit <input type="checkbox"/>

Date of Examination **27112023** Expiry Date of Certificate **26112025**

Declaration by Seafarer

I have read and understood the notes overleaf and declare that all answers provided are to the best of my knowledge true.
I agree that by withholding any information vital to this medical examination will lead to cancellation and withdrawal of this certificate.
Signature of Seafarer: _____

Name, Signature and Official stamp/seal of Approved Doctor:

Dr. Alex K. Molokwu *[Signature]*

IMPERIAL MEDICAL CENTRE
65, Brickfield Road
Ebutu-Metta West Lagos.
Date **27-11-2023**





FEDERAL REPUBLIC OF NIGERIA
NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY
SEAFARERS' MEDICAL CERTIFICATION APPLICATION FORM
UNDER REGULATION 1.2, STANDARD A1.2, OF MLC 2006

A. APPLICANT'S BIODATA

SURNAME: ADOGA

DATE OF BIRTH: 29/09/94 AGE: 29 SEX: M

DATE OF APPLICATION: 27-11-2023

Discharge Book NO.: N 061215 Company _____

Address: _____

OTHER NAMES ABRAHAM EMMANUEL

NATIONALITY: Nigerian

PLACE OF BIRTH: Nigeria

Vessel _____

DEPT OF SHIP: DECK ENGINE: CATERING: MASTER/MATE: OTHERS SPECIFY: _____

B. APPLICANT'S MEDICAL HISTORY (Under guidance from a medical personnel)

Have you ever had

(1)	Admission to hospital whatever reason at all in the past	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	(16)	Sexually Transmitted diseases (Gonorrhea, Syphilis, AIDS etc)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
(2)	Any surgical operation	<input type="checkbox"/> <input checked="" type="checkbox"/>	(17)	Any persistent Muscular weakness	<input type="checkbox"/> <input checked="" type="checkbox"/>
(3)	Any accident	<input type="checkbox"/> <input checked="" type="checkbox"/>	(18)	Loss of consciousness	<input type="checkbox"/> <input checked="" type="checkbox"/>
(4)	Any mental illness(5)	<input type="checkbox"/> <input checked="" type="checkbox"/>	(19)	Pain in spine, Back or any Joint(20)	<input type="checkbox"/> <input checked="" type="checkbox"/>
(5)	Any convulsions(6)	<input type="checkbox"/> <input checked="" type="checkbox"/>	(20)	Balance problem(21)	<input type="checkbox"/> <input checked="" type="checkbox"/>
(6)	Any Ear or Hearing problem	<input type="checkbox"/> <input checked="" type="checkbox"/>	(21)	Anal pain or swelling(22)	<input type="checkbox"/> <input checked="" type="checkbox"/>
(7)	Any persistent Cough	<input type="checkbox"/> <input checked="" type="checkbox"/>	(22)	Restricted mobility	<input type="checkbox"/> <input checked="" type="checkbox"/>
(8)	Difficulty with breathing or breathlessness on mild exertion	<input type="checkbox"/> <input checked="" type="checkbox"/>	(23)	Excessive thirst	<input type="checkbox"/> <input checked="" type="checkbox"/>
(9)	Palpitations	<input type="checkbox"/> <input checked="" type="checkbox"/>	(24)	A sign-off as sick or a repatriation from a ship?	<input type="checkbox"/> <input checked="" type="checkbox"/>
(10)	High blood pressure	<input type="checkbox"/> <input checked="" type="checkbox"/>	(25)	Excessive weight loss	<input type="checkbox"/> <input checked="" type="checkbox"/>
(11)	Chest pain at rest or on exertion	<input type="checkbox"/> <input checked="" type="checkbox"/>	(26)	An unfit declaration for sea duty ?	<input type="checkbox"/> <input checked="" type="checkbox"/>
(12)	Stomach pain	<input type="checkbox"/> <input checked="" type="checkbox"/>	(27)	Sugar in the Urine	<input type="checkbox"/> <input checked="" type="checkbox"/>
(13)	Any vomiting	<input type="checkbox"/> <input checked="" type="checkbox"/>	(28)	Your medical certificate restricted or revoked?	<input type="checkbox"/> <input checked="" type="checkbox"/>
(14)	Blood in vomitus or stool	<input type="checkbox"/> <input checked="" type="checkbox"/>	(29)	To wear contact Lens or Glasses	<input type="checkbox"/> <input checked="" type="checkbox"/>
(15)	Any problem passing urine	<input type="checkbox"/> <input checked="" type="checkbox"/>	(30)	To be placed on any medication	<input type="checkbox"/> <input checked="" type="checkbox"/>

2. IMMUNIZATION HISTORY (Have you been immunized before)

YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES DATE	YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES DATE	YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES DATE	YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES DATE
(A) Tetanus <input type="checkbox"/> <input checked="" type="checkbox"/> _____	(B) Typhoid Fever <input type="checkbox"/> <input checked="" type="checkbox"/> _____	(C) Cholera <input type="checkbox"/> <input checked="" type="checkbox"/> _____	(D) Meningitis <input type="checkbox"/> <input checked="" type="checkbox"/> _____
(E) Yellow Fever <input type="checkbox"/> <input checked="" type="checkbox"/> _____	(F) Hepatitis <input type="checkbox"/> <input checked="" type="checkbox"/> _____	(G) Tuberculosis <input type="checkbox"/> <input checked="" type="checkbox"/> _____	

3. SOCIAL/FAMILY HISTORY

- (A) Do you smoke, Take Alcohol or use drugs? YES NO
- (B) Has any member of your family or relative had mental illness, Epilepsy, Blood disorder, Heart trouble, Hypertension or any other disorder (eg. Allergy etc.) YES NO
- (C) You have a medical or other condition not mentioned above? YES NO
- (D) others _____

I, ADOGA ABRAHAM, declare that the information given above is correct to the best of my knowledge. I consent to the examining doctor to endorse my medical information on the Medical fitness Certificate for official purposes (To be signed only in the presence of examining doctor)

27-11-23
Date

ADOGA A-E
Name of Applicant

Signature of Applicant



NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

SEAFARERS' MEDICAL EXAMINATION

PHYSICIAN'S EXAMINATION REPORT FOR SEAFARERS
UNDER REGULATION 1.2, STANDARD A1.2, OF MLC 2006Name: ADOGA ABRAHAM EMMANUEL
(Surname first)

Discharge Book No: N061215

APPEARANCE

Mentally And Physically fit

GENERAL EXAMINATION

Weight: 74Kg Height 1.8m Gait Normal Abnormal
Temperature 36°C Blood Pressure 120/70mmHg Pulse Rate 72/min Pallor Nil
Lymph Nodes Palpable Impalpable If palpable, state region/location

SYSTEMIC EXAMINATION

	Normal	Abnormal
(1) Central Nervous System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(2) Cardiovascular System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(3) Respiratory System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(4) Gastrointestinal System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(5) Hernial Orifices	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(6) Endocrine System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(7) Locomotor System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(8) Orodental	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(9) Skin (including Varicosities)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(10) Ear, Nose & Throat.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

OTHER EXAMINATIONS

	Normal	Abnormal
(1) Speech (Voice Communication)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(2) Hearing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

- Audiometry

(3) Eyesight
Visual Acuity RT LT
Without glasses 6/6 6/C
With glasses 6/ 6/
Colour Vision Normal Abnormal

(1) Blood group & Genotype (Enter results) B+ &
(2) Full blood count _____
(3) VDRL Negative Positive

(4) HIV Negative Positive

(5) Hepatitis B Antigen Negative Positive

(6) Widal (for Catering Dept.) Negative
(7) Urinalysis NAD
(8) Chest X-Ray with Report Normal Abnormal

(9) Electrocardiogram Normal Abnormal

Dr. Alex K. Molokwu

Physician's Name

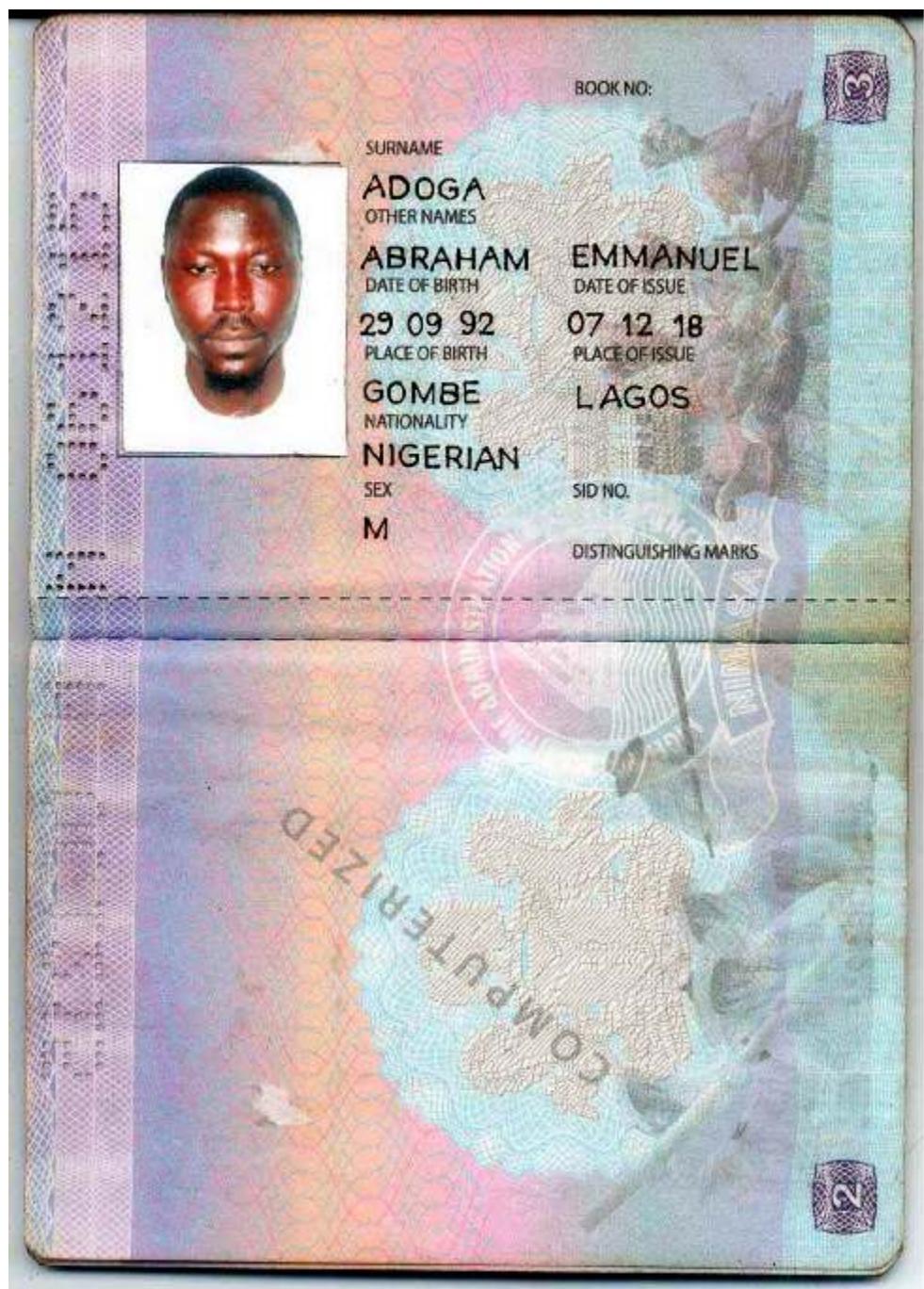
IMPERIAL MEDICAL CENTRE
65, Brickfield Road
Ebutu-Metta West Lagos.

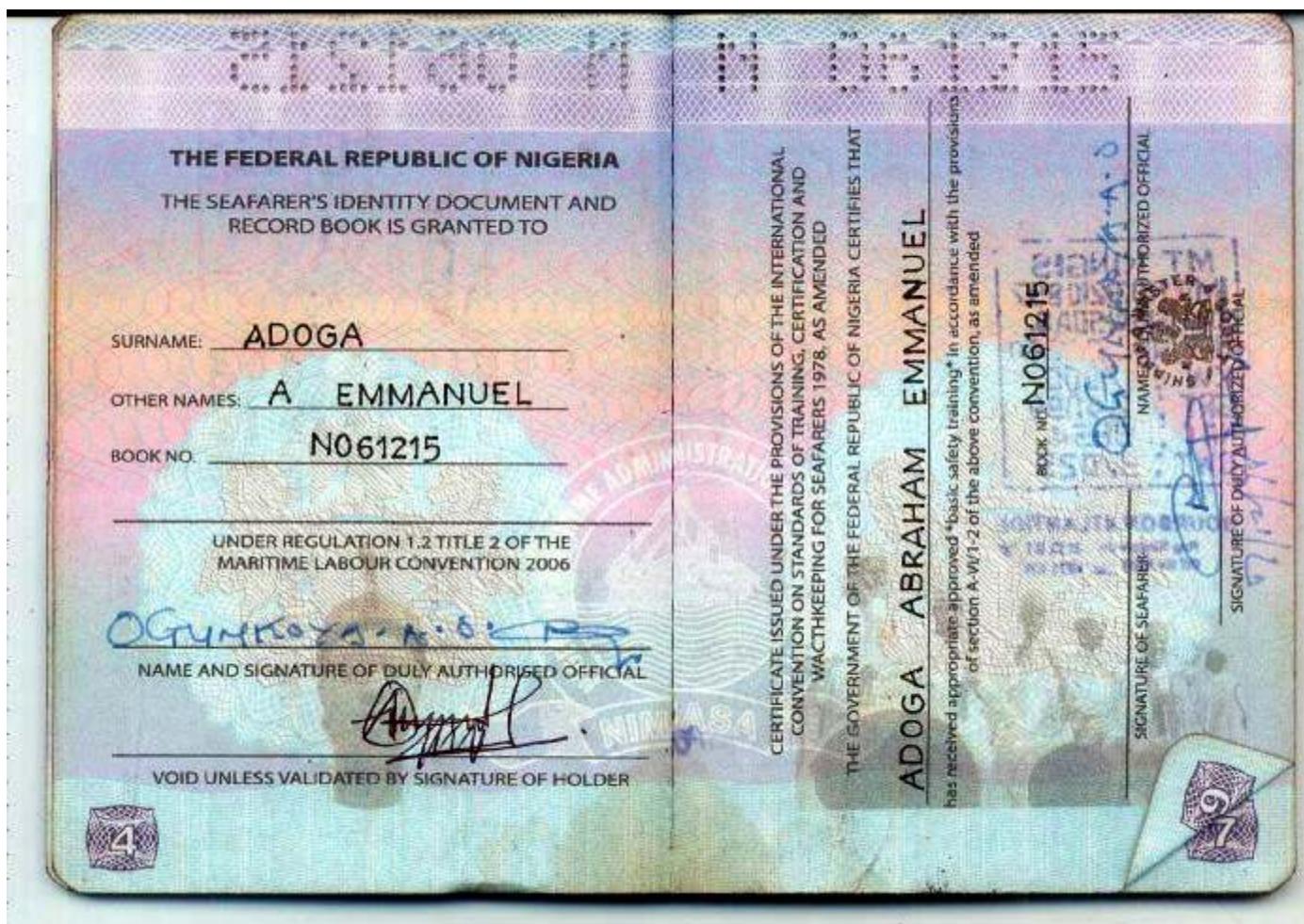
Date 27-11-2023

Physician's Signature / Stamp

Physician's Address/Telephone No.

Imperial Medical Centre, Ebutu-Metta (West), Lagos.





RECORD OF SEAFARER'S SEAGOING SERVICE

Name of Vessel, Gross Tonnage or Propulsion Power, IMO number, Type	Date and Place of Engagement	Date and Place of Discharge
MT KINGIS IMO NO: 9210897 CALL SIGN: SOAQ OFF NO: 320 KW : 7500 GRT : 24099 NRT : 9854 DWT : 3/025	10/11/2017 LAGOS	12/16/2019 LAGOS
BOURBON ATLANTIDE Reg Kingdom 2102 ST Off No. 9007 - 4871 KW	20-8-19 LAGOS	22-12-19 LAGOS
SAFESEA NEHA III IMO NO.: 9266475 CALL SIGN: V7105 OFFICIAL GRT : 28 059 DWT : 46 013 NRT : 11 645 KW : 9267	11-06-2020 LAGOS OFFSHORE	26-11-20 LAGOS OFFSHORE

*Insert KW/BHP for engine room workers, for others insert gross tonnage
*Insert FGN for International Voyage, NCV for Near Coastal Voyage

6

RECORD OF SEAFARER'S SEAGOING SERVICE

Grade (Rank)	Voyage Description	1. Ship's Stamp and Signature of Master
		2. Signature and Official Stamp of Shipping Master
A-CADET	FGN	
3RD OFFICER	FGN	

* Insert KW/BHP for engine room workers, for others insert gross tonnage
*Insert FGN for International Voyage, NCV for Near Coastal Voyage

7

RECORD OF SEAFARER'S SEAGOING SERVICE			RECORD OF SEAFARER'S SEAGOING SERVICE		
Name of Vessel, Gross Tonnage or Propulsion Power, IMO number, Type	Date and Place of Engagement	Date and Place of Discharge	Grade (Rank)	Voyage Description	1. Ship's Stamp and Signature of Master 2. Signature and Official Stamp of Shipping Master
					1. Master
M/T OCEAN STREAM NHT 14754 DRT 11492 DN 37008 Lagos	15-12-20 LAGOS	20-8-21 BONNY	3RD OFFICER	H/T	 

* Insert KW/BHP for engine room workers, for others insert gross tonnage
 *Insert FGN for International Voyage, NCV for Near Coastal Voyage

* Insert KW/BHP for engine room workers, for others insert gross tonnage
 *Insert FGN for International Voyage, NCV for Near Coastal Voyage

8 9

FEDERAL REPUBLIC OF NIGERIA



INTERNATIONAL CERTIFICATE
OF VACCINATION OR PROPHYLAXIS
CERTIFICAT INTERNATIONAL
DE VACCINATION OU DE PROPHYLAXIE

Issued to: Addo GA ABRATTAM

ADDO GA ABRATTAM
Emmanuel

Passport No. or Travel Document No.

Numéro du passeport ou de la pièce justificative

A D 9 1 8 0 9 3 6 8



Scan QR Code
on mobile



B539216

OTHER VACCINATIONS-AUTRES VACCINATIONS

Date	Nature of vaccine Genre de vaccin	Dose	Physician's Signature Signature de medecin	Official Signature Function Official	Stamp Gachet
31 March 2017	C.S.m	0.5ml	Ruel	FURU HEALTH OFFICE FMOW, NIGERIA CODE: 03/01	
31 March 2017	O.P.V	Inj	Ruel	FURU HEALTH OFFICE FMOW, NIGERIA CODE: 03/01	



MARITIME ACADEMY OF NIGERIA, ORON

CAMPUS: P. M. B. 1089, ORON, AKWA IBOM
TEL./FAX: 087-775303
e-mail:macademyoron@yahoo.com
website:www.maritimeacademynigeria.org.

Our Ref: MAN/13/HND/NS/045

July 22, 2016

Your Ref:

Date:

OFFICE OF THE REGISTRAR

ADOGA ABRAHAM EMMANUEL
SCHOOL OF NAUTICAL SCIENCE
MARITIME ACADEMY OF NIGERIA, ORON

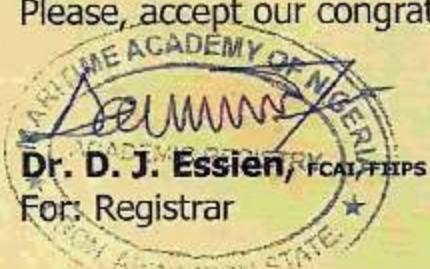
NOTIFICATION OF HIGHER NATIONAL DIPLOMA EXAMINATION RESULT

I am pleased to inform you that the results of 2013/2015 **HIGHER NATIONAL DIPLOMA EXAMINATIONS** show that you have satisfied the requirements for graduation and award of **HIGHER NATIONAL DIPLOMA** in **NAUTICAL SCIENCE** at **UPPER CREDIT** level with effect from **OCTOBER, 2016**.

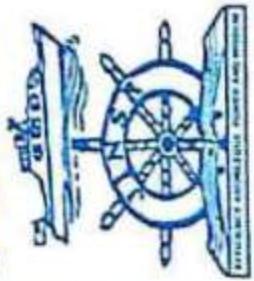
The results have been approved by the academic Board of the Maritime Academy of Nigeria, Oron.

The actual award of Diploma/Certificate will be made to you in due course.

Please, accept our congratulations.



JOEMARINE INSTITUTE OF NAUTICAL STUDIES & RESEARCH



39th Street, Plot 10 DDPDA Estate, Warri, Delta State, Nigeria.

08053095168 08060716430 053290964 053290962

E-mail: info@joemarineng.com, epidejmarine@yahoo.com, www.joemarineng.com/institute

CERTIFICATE OF TRAINING

BASIC OIL, CHEMICAL AND LIQUEFIED GAS TANKER CARGO OPERATIONS.

This is to Certify that:-

ADOGA ABRAHAM EMMANUEL

Has successfully completed a programme of training approved by the Nigerian Maritime Administration and Safety Agency(NIMASA), meeting the requirement laid down in accordance with Section A-V/1-1 of the STCW 2010 Convention and Table-A-V/1-2 of the 2010 Code as amended.

Cert No.: 0002097

JINSRD1F/5/2097/2018.

Nationality.....NIGERIAN.....

Signature of Holder

Director of Studies



Date of Birth: 29TH SEPTEMBER, 1984.

Date of Issue: 1ST AUGUST, 2018.

This Certificate is issued under the Authority
of the Nigerian Maritime Administration and Safety Agency(NIMASA) Date of Issue: 1ST AUGUST, 2018.



LAGOS STATE GOVERNMENT
GENERAL HOSPITAL, APAPA
(Established In 1964)

16, Ibikunle Akintoye Street,
Off Randle Road,
Apapa, Lagos.
P.M.B. No 1014
All Letters to be Addressed to the
Medical Director

Telephone: 08075690127
08060211162
Website: www.generalthospitalapapa.com
E-mail: ghapapa@gmail.com

Ref No: **SUB/025/GHA/VOL.1/279**

3rd June, 2020

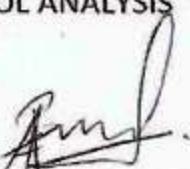
TO WHOM IT MAY CONCERN:

RE: ADOGA ABRAHAM EMMANUEL (25YRS) (M)
MEDICAL CERTIFICATE OF FITNESS

The above named patient has been medically examined by me and found to be physical and mentally fit.

The laboratory investigations are as follows:

PCV	-	40% Normal
Alcohol	-	Negative
HBSaG	-	Negative
HCV	-	Negative
Urinalysis	-	Negative
HIV	-	Negative
Mantoux Test	-	0 mm Negative
SPUTUM AFB	-	NO AFB Seen
WIDALS	-	Non Reactive
VDRL	-	Negative
STOOL ANALYSIS	-	No ova cyst of parasite seen


DR. AFOLABI S.A
SNR. MEDICAL OFFICER

MISSION STATEMENT: "To continually improve on our ability to satisfy our clients by providing High Quality care, embracing the Right attitude and Best Professional Practices"

The West African Examinations Council

West African Senior School Certificate

JUNE 2011

This is to Certify that: ADOGA ABRAHAM EMMANUEL

born on: SEPTEMBER 27, 1992

sex: MALE

having been in attendance at

ALL SAINTS COLLEGE, GOMBE

sat the West African Senior School Certificate Examination
and obtained the results shown below.



SUBJECT	GRADE
CHRISTIAN RELIGIOUS KNOWLEDGE	D7
ECONOMICS	E8
GEOGRAPHY	B3
GOVERNMENT	C6
ENGLISH LANGUAGE	C6
HAUSA LANGUAGE	E8
MATHEMATICS	C6
AGRICULTURAL SCIENCE	C6
BIOLOGY	E8
SUBJECTS RECORDED	NINE

CD 27

Chairman of Council

Registrar to Council

SCHOOL
CANDIDATES

5 & 0
5000.00 - 5/11

Candidate No.

4160607007

Certificate No.

NGWASSCS 14809385



Any alteration, erasure or absence of photograph renders this Certificate invalid.



STCW
Bridge Resource Management
Certificate of Training

Elkins Marine Training International, USA certifies that on November 20, 2019

ADOGA ABRAHAM EMMANUEL

successfully completed the Elkins Marine Training International,
International Maritime Organization and United States Coast Guard / Nigeria approved
24-hour Bridge Resource Management Course
at Elkins Marine Training International (Nigeria), Ltd.

This certificate # 02-8-5407

satisfies the regulatory requirements of:
United States 46 Code of Federal Regulation 10.205(0), and Section B-VIII/2, Part 3-1 of the
Seafarers' Training, Certification and Watchkeeping (STCW) Code as defined in the
International Convention on Standards of Training, Certification and Watchkeeping for Seafarers,
as amended in 2010 by the International Maritime Organization.

Nwanyeri

Jeje N. Nwanyeri
Managing Director & Examiner

J. David Byrd
President & Chief Executive Officer

J. David Byrd



Proof - of - Passing

This certificate must be attached to
FCC Form 605 when applying for a new
commercial radio operator license.
This is to certify that

ADOGA ABRAHAM EMMANUEL

has passed

Elements One and Seven

Serial Number E-19-00 1836

November 10, 2019

**ELKINS
INSTITUTE**

Genevieve B. Ford
COLE MANAGER

A Division of BFT Training Unlimited, Inc.



CHARKIN MARITIME & OFFSHORE SAFETY CENTRE

PORT HARCOURT - NIGERIA. Website: www.charkingroup.com



Certificate of Training

This is to Certify that

ADOGA ABRAHAM EMMANUEL

Has successfully completed a

Certificate of Proficiency for Seafarers with Security Awareness

CEO/MD

No. **SAT/07347**

CMOSC/SAT/04/17

Training Course at
CHARKIN MARITIME & OFFSHORE SAFETY CENTRE

and has met the Standard of Competence as specified in **SECTION A-VI/6,**
Table A-VI/6-1, Table A-VI/6-2 of the Revised STCW (2010)

HOD

6TH APR., 2017

Date Issued

**PARTICULARS OF HOLDER
OF THE CERTIFICATE**

NOTES

1. The original of this certificate must be kept available in accordance with Regulation 3/4 of the STCW Convention while serving on a ship.
2. Attention is drawn to provisions of the law whereby fraudulent use, forgery or alteration of this document could constitute a criminal offence.
3. Any person finding this document should send it to:
Director
Maritime Safety & Seafarers Standards
NIMASA
4 Burma Road, Apapa, Lagos, Nigeria.
Postage will be paid by the addressee.
4. The validity of this certificate can be checked during office hours by contacting the Director, Maritime Safety & Seafarers Standards, NIMASA, 4 Burma Road Apapa, Lagos, Nigeria.
Tel: 01-2713827
01-2711190
Email: nimasa@nimasa.gov.ng

006053

NAME

ADOGA ABRAHAM EMMANUEL

PLACE OF BIRTH

GAMBE GOMBE

DATE OF BIRTH

29-SEP-1994

SIGNATURE OF HOLDER
OF THE CERTIFICATE



1



These
are to request and
require in the name of the
President and Commander-in-
Chief of the Armed Forces of the
Federal Republic of Nigeria all those
whom it may concern to allow the
bearer to pass freely without let or
hindrance and to afford him or her
every assistance and protection
of which he or she may
stand in need.

A 09809368

FEDERAL REPUBLIC OF NIGERIA

PASSPORT
PASSEPORT

Type / Type Country Code / Code du pays

Passport No. / Passport N°

A black and white head-and-shoulders portrait of a man. He has short, dark hair and is looking directly at the camera with a neutral expression. He is wearing a dark-colored t-shirt. The background is plain and light-colored.

Diagram 4 New

ADOGA

Given Name: J. Frisone

ABRAHAM E.

Nationality & Nationality

NIGERIAN

Data ref 842874

29 SEP / SEP 92

Sex / Seite 17

M GOMBE

MAKURDI

Date of issue:

06 NOV / NOV 18

14

Date of Entry /

05 NOV / NOV 25

۱۷۸

MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

16 Aladja Avenue, Off Enerhen Road, Effurun, Delta State Nigeria. Tell: +234-8021122189, 08054722786



MRT/ISM/1038/2020
Certificate Number

CERTIFICATE OF TRAINING IN INTERNATIONAL SAFETY MANAGEMENT (ISM) CODE

This is to certify that

ADOGA ABRAHAM EMMANUEL

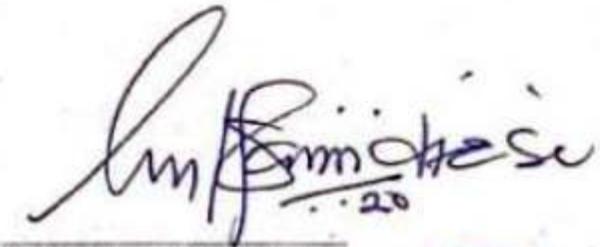
Date of Birth: 29/09/1994

Has successfully completed an approved training in:

International Safety Management

accordance with the requirements of Chapter 1x of the International Convention for the Safety of Life at Sea SOLAS 1974 as amended.

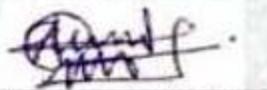
This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)



Signature of Instructor



Issue Date
17/01/2020


Signature of Holder





AIMS INSTITUTE OF MARITIME STUDIES PVT. LTD.

216-B, Sai Chambers, Sector 11, C.B.D Belapur,
Navi Mumbai-400614 India

Phone : 022-41277001 , M : +919594966108

Email : training@aimsamaritime.com, Website : www.aimsamaritime.com



CERT NO. **AIM/TASCO/12/152/2020**

THIS IS TO CERTIFY THAT Mr. ADOGA ABRAHAM EMMANUEL

Date of Birth. 29/09/1994

Holder of CDC No. NIG-061215 Passport No. A09809368

Certificate of Competency, OFFICER-IN-CHARGE OF NAVIGATIONAL WATCH

Of (issuing country) NIGERIA Grade No. 005328

Has successfully completed value added skill development course Certificate of:

ADVANCED TRAINING FOR OIL TANKER CARGO OPERATIONS - TASCO

Held From 03/12/2020 to 07/12/2020

The course meets the training requirement laid down in Regulation V/1-1 paragraph 4, Section a-v/1-1 paragraph 2 and Table A-V/1-1-2 of the STCW 1978 as amended 2010 Manila Convention.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of this certificate.

INSTITUTE OF MARITIME STUDIES

www.aimsamaritime.com

07/12/2020

Date of Issue

06/12/2025

Date of Expiry



Signature of Candidate

Capt Ahuja
Course Coordinator

Capt. P S Ahuja
Director

This course is Approved and Accepted by LIBERIAN Flag state authority
E-Learning Certificate / Validated on www.aimsamaritime.com

**AIMS INSTITUTE OF MARITIME STUDIES PVT. LTD.**216-B, Sai Chambers, Sector 11, C.B.D Belapur,
Navi Mumbai-400614 India

Phone : 022-41277001, M : +919594966108

Email : training@aimsamaritime.com, Website : www.aimsamaritime.comCERT NO. AIMS/CHEMCO/12/132/2020THIS IS TO CERTIFY THAT Mr. ADOGA ABRAHAM EMMANUELDate of Birth. 29/09/1994Holder of CDC No. NIG-061215 Passport No. A09809368Certificate of Competency, OFFICER-IN-CHARGE OF NAVIGATIONAL WATCHOf (issuing country) NIGERIA Grade No. 005328

Has successfully completed value added skill development course Certificate of:

**ADVANCED TRAINING FOR CHEMICAL TANKER
CARGO OPERATIONS- CHEMCO**Held From 08/12/2020 to 12/12/2020

The course meets the training requirements laid down in Regulation v/1-1 Paragraph 6, Section A-v/1-1 paragraph 3 and Table a-v/1-1-3 of the STCW 1978 Convention and as amended 2010 Manila Convention.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of this certificate.

INSTITUTE OF MARITIME STUDIESwww.aimsamaritime.com12/12/2020

Date of Issue

11/12/2025

Date of Expiry



Signature of Candidate

Capt Ahuja
Course Coordinator
Capt. P S Ahuja
Director

This course is Approved and Accepted by LIBERIAN Flag state authority
E-Learning Certificate / Validated on www.aimsamaritime.com

FUNCTIONS *	LEVEL *	LIMITATIONS APPLYING * (IF ANY) <small>Not valid for service on tonnage of management level unless endorsed on page 8</small>
1	O	UNLIMITED
2		
3		
7		

* See page 9

The lawful holder of this certificate may serve in the following capacity or the capacities specified in the safe manning regulations.

CAPACITY	LIMITATIONS APPLYING (IF ANY)
OOW	UNLIMITED

006053

4

ENDORSEMENT



ENDORSEMENT ATTESTING THErecognition OF A CERTIFICATE OF COMPETENCY ISSUED UNDER THE PROVISIONS OF THE INTERNATIONAL CONVENTION ON STANDARDS OF TRAINING, CERTIFICATION, AND WATCHKEEPING FOR SEAFARERS, 1978, AS AMENDED

The Government of _____ certifies that this

Certificate No. _____ issued to _____

by or on behalf of the Government of _____ is duly
recognised in accordance with the provisions of regulation I/10 of the above
Convention, as amended, and the lawful holder is authorised to perform the
following functions at the levels specified on page 4, subject to any
limitations indicated, until _____ or until the date of expiry
of any extension of the validity of this endorsement as may be shown on
page 6.

ISSUED ON _____

SIGNATURE OF DULY AUTHORISED OFFICIAL

NAME OF DULY AUTHORISED OFFICIAL

006053

5

JOEMARINE INSTITUTE OF NAUTICAL STUDIES & RESEARCH



39th Street, Plot 10, DDPA Estate, Warri, Delta State, Nigeria
08053095168, 08060716430, 053290964, 053290962

E-mail: info@joemarineng.com, epideimarin@yahoo.com, www.joemarineng.com/institute



CERTIFICATE OF TRAINING

BASIC OIL, CHEMICAL, LIQUEFIED GAS TANKER CARGO OPERATIONS.

This is to Certify that:-

ADOGA ABRAHAM EMMANUEL

Has successfully completed a programme of training approved by the Nigerian Maritime Administration and Safety Agency (NIMASA), meeting the requirement laid down in accordance with Section A-VI-1 of the STCW 2010 Convention and Table A-VI-2 of the 2010 Code as amended.

Cert No. 0002097

JINSR/OTF/5/2097/2018.

Nationality: **NERIAN**




Signature of Holder


Director of Studies



Date Of Birth: 20TH SEPTEMBER, 1994

Date of Issue: 1ST AUGUST' 2018

This Certificate is issued under the Authority
of the Nigerian Maritime Administration and Safety Agency (NIMASA)



Hudson Trident Training Centre



Certificate of Training

This is to certify that

Adaga Abraham Emmanuel

Date of Birth: 02:10:1994

Certificate No: HTTC-DPI-1806009

has successfully completed the

Dynamic Positioning Induction Course

From June 11 - 15, 2018
Issued June 15, 2018

Denzel
INSTRUCTOR

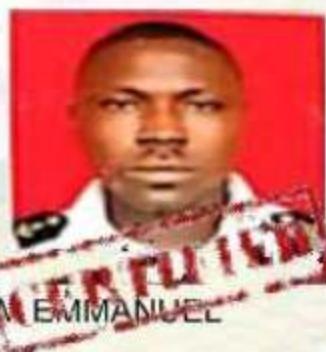
Samuel
OWNER

FEDERAL REPUBLIC OF NIGERIA



Certificate of Competency Verification Merchant Shipping Act

(Training & Certification of Seafarers)
Regulation 2010



CERTIFICATE NUMBER: 005328

NAME: ADOGA ABRAHAM EMMANUEL

CAPACITY: OFFICER IN CHARGE OF
NAVIGATIONAL WATCH

LIMITATION: UNLIMITED

STCW REG: II/1

DATE OF BIRTH: 29-Sept-1994

ISSUE DATE: 30-Apr-2020

LAST REVALIDATION: 30-Apr-2020

DISCHARGE BOOK NUMBER: 061215

Certificate Issued Under The Provision Of The International Convention On Standard Of Training,
Certification And Watchkeeping For Seafarers.



005328

MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

16 Aladja Avenue, Off Enerhen Road, Effurun, Delta State Nigeria. Tel: +234-8021122189, 08054722786



MRT/BRM/0124/2020
Certificate Number

This is to certify that

ADOGA ABRAHAM EMMANUEL

Has successfully completed an approved training in:

BRIDGE RESOURCE MANAGEMENT

The course is conducted in accordance with guidelines given in the IMO Model Course 1.22 and fulfills the training requirements for competencies stated in
Section A-II/1 & A-II/2, Table A-II/1 & Table A-II/2 of the Revised STCW Convention (2010)

A handwritten signature in black ink.

Signature of Instructor



Issue Date
10/01/2020



A handwritten signature in black ink.

Signature of Holder



Email:info@marimared.com | website:www.marimared.com



NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

TELEGRAM CABLES
MARITIME LAGOS
Tel: 5872214, 5804800-9
Fax: 5871329
Telex: 23891, NAMARI NG
Website: www.nimasa.gov.ng

MARITIME HOUSE
4 Burma Road
Apapa
P. M. B. 12861
Lagos.

ADOGA ABRAHAM EMMANUEL
Block B Room 4
Quiz Barracks
Apapa Lagos State
07068378363

4th February, 2019

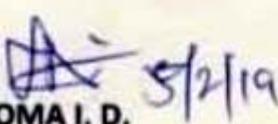
RE: APPLICATION FOR REGISTRATION STATUS AS A SEAFARER.

I am directed to acknowledge the receipt of your letter dated 10th December, 2018 on the above subject.

The Agency has processed your application and your registration details are as follows:

Name: ADOGA ABRAHAM EMMANUEL
Reg. No: N/DC/0526
Category: THIRD OFFICER
Status: REGISTERED

Please accept the assurances of our esteemed regards.


CHIROMA I. D.
Deputy Director Maritime Labour Services
For: Director – General.

Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State www.maritimeacademy.gov.ng

Certificate of Proficiency in ADVANCED FIRE FIGHTING

No. 035806

This is to certify that

Adoga Abraham Emmanuel

29th Sept, 2014

Born on



has successfully completed an approved training in:

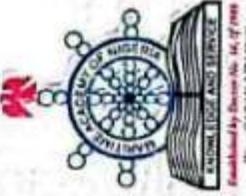
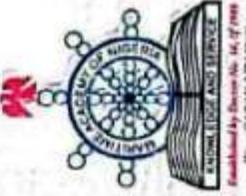
ADVANCED FIRE FIGHTING

Regulation VI/3 and Section A-VI/3, Paragraphs 1-4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010.

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

H. H. H.
Instructor

Rector



A. J. I.
Holder

31st Oct, 2019
Date

*This Certificate is not valid without the Academy's Official Seal

Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State www.maritimeacademy.gov.ng

Certificate of Proficiency in **MEDICAL FIRST AID**

This is to certify that

Addoza Abraham Emmanuel

29th Sept, 1994

Born on



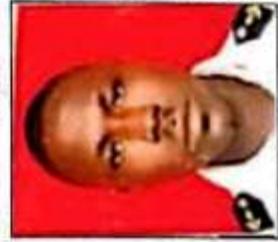
has successfully completed an approved training in:

Medical First Aid on Board Ship

Regulation VII/4 and Section A-VII/4, Paragraphs 1-3 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010.

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

[Signature]
Instructor
[Signature]
Rector



Issued by Permit No. 16/17/04
New CAF ALFA 2013

[Signature]
Holder

6th Dec, 2019
Date

*This Certificate is not valid without the Academy's Official Seal

Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State www.maritimeacademy.gov.ng



This is to certify that

Adoga Abraham Emmanuel

29th Sept., 1994

Born on



SHIP SECURITY OFFICER

in accordance with Regulation VII/5, Section A-VI/5 and Table A-VII/1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010; and Sections A/2.1.6. and A/12 of the International Ship and Port Facility Security (ISPS) Code.

From 25th to 26th March, 2019

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

Instructor: _____
Sector: _____



Printed on CFC Approved Paper

HOLDER
Signature

*This Certificate is not valid without the Academy's Official Seal

Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State www.maritimeacademy.gov.ng

Certificate of Proficiency in

**SURVIVAL CRAFT AND RESCUE BOATS
(OTHER THAN FAST RESCUE BOATS)**

No. 135171

This is to certify that

Adoga Abraham Emmanuel

29th Sept, 1994

Born on



has successfully completed an approved training in:
Survival Craft and Rescue Boats
(Other than Fast Rescue Boats)

Regulation VII/2 and Section A-VII/2, Paragraphs 1-4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention), as amended in 2010.

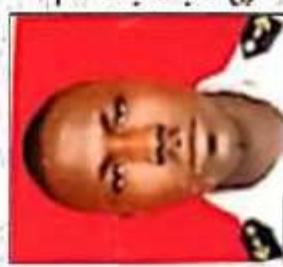
This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

Signature

Inspector

Signature

Rector



1 January 2010

26th Oct, 2010

Holder

Date

This Certificate is not valid without the Academy's Official Seal

NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

MINISTRY OF TRANSPORT



00001568

GMDSS - GENERAL OPERATOR'S CERTIFICATE

Awarded to

ADOGA ABRAHAM EMMANUEL

Upon satisfactory completion of approved course conducted

From **04-11-2019** To **10-11-2019** EXPIRES: **08-12-24**

29.09.1994/GOMBE GOMBE NIG 042311

Date and Place of Birth Discharge Book Number

Signature of Holder

09-12-2019

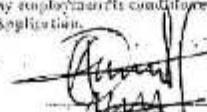
Date of Issue

CAPT. SUNDAY M. UMOREN

Signature of Duty Authorised Official

This certificate is issued as evidence of attendance at a course of training in GMDSS-General Operator's Certificate covering the requirements set out in regulation IV/2 of the International Convention on Standards of Training, Certification and Watch-keeping for Seafarers (STCW), 1978 as amended.

COURSES (CERTIFIED)

NAME OF COURSES	STCW95 TRAINING COURSES			
	REG. STCW95	DOC. NO.	ISSUED DATE	EXPIRES DATE
PERSONAL SURVIVAL TECHNICS	A-VII-1	8657	05/11/2018	06/11/2023
BASIC FIRE FIGHTING	A-VII-2	8657	05/11/2018	06/11/2023
ELEMENTARY FIRST AID	A-VII-3	8657	05/11/2018	06/11/2023
PERSONAL SAFETY AND SOCIAL RESPONSIBILITY	A-VII-4	8657	05/11/2018	06/11/2023
PROFICIENCY IN SURVIVAL CRAFT	A-VII-1			
PROFICIENCY IN FAST RESCUE BOATS	A-VII-2			
ADVANCED FIRE FIGHTING	A-VII-3			
MEDICAL FIRST AID	A-VII-1			
MEDICAL CARE	A-VII-1			
RADAR APRA-OPERATIONAL LEVEL	A-I/11,II/1			
RADAR APRA/SAR MANAGEMENT	A-I/12,II/2			
TRANSPORT AND HANDLING DANGEROUS AND HARMFUL CARGOES	A-II/1,2 OR III/1,2			
PREVENTION OF POLLUTION-OF THE MARINE ENVIRON (MARPOL 73/78)	A-II/1,2 OR III/1,2			
MARITIME ENGLISH, PROBLEMS OF COMMUNICATION IN HUMAN REL.	A-I/1,2 OR III/1,2			
IMO COURSES FOR TANKERS/LNG/LNG/ CHEMICAL				
OIL TANKER FAMILIARISATION	A-VII, I-7			
SPECIALISED TRAINING FOR OIL T.	A-VII, 8-14			
SPECIALISED TRAINING FOR CHEM. T.	A-VII, 15-21			
SPECIALISED TRAINING FOR L.G.T.	A-VII, 22-24			
CMDSS				
ISM				
IMO COURSES FOR RO-RO / PASSENGER VESSELS				
PROFICIENCY IN CROWD MGMT.	A-VII,1			
RO-RO/PASSENGER SHIP FAM.	A-VII,2			
PROFICIENCY IN SAFETY, CARGO.	A-VII,4			
PROFICIENCY IN CRISIS-MGMT	A-VII,5			
<p>I hereby declare that I do not suffer from any illness or pre-existent adverse medical condition and that the information given hereof is true to my knowledge. I also declare that I have not been concealed in the application procedure by any statement or by supplying false information. I declare that I am fit for duty and that I have no health condition which would prevent me from performing my employment's functions upon a normal health evaluation. I do hereby authorise and declare giving the required information in this application.</p>				
SIGNED:				
	DATE: 18/03/2020 LA90			

CAREER DETAILS

DETAILS OF LICENCES/CERTIFICATES

QUALIFICATION	DOC NO	RANK	STCW REG.	DATE ISSUED	DATE EXPIRE	DOC AUTHORITY
NATIONAL LICENCE						
FLAG STATE LICENCE 1						
FLAG STATE LICENCE 2						
GOC. NATIONAL						
TANKER FAMILIARIZATION						
CHEM TANKER HIGHEST GRADE						
OIL TANKER HIGHEST GRADE						
LPG TANKER HIGHEST GRADE						
STCW95 ENDORSEMENT						

RECORD OF PREVIOUS SERVICES

COMPANY	RANK	SHIP PARTICULARS					MAIN ENGINE POWER	TYPE	DATE FROM
		NAME	TYPE	FLAG	GRT	YEAR BUILT			
Bourbon Interall	CABT	Bourbon Atlantic	SHIP	SVG	2152				SANTIC 24/11/19

SUMMARY OF SEA SERVICE IN MONTHS FOR ALL CARRIER

RANK	BULK	CARGO	RO-RO	OIL TK	CHEMICAL TK	REEFER	CONTAINER	OTHER

SUMMARY OF EXPERIENCE ON ENGINE TYPE IN MONTHS FOR ALL CARRIER ENGINEERS AFTER DATE

ENGINE TYPE	MAN	SULZER	B & W	PELSTICK	STEAM TURBINE	DEUTZ	OTHER
RANK							

COLLEGES/INSTITUTIONS

NAME OF INSTITUTION	COURSE ATTENDED	FROM	TO	QUALIFICATION
All Saint College MAN ORION	SSCE HND	16/11/2016	02/11/2018	SSCE HND
		13/11/2018	04/02/16	

CARRIER DETAILS

DETAILS OF LICENCES/CERTIFICATES

QUALIFICATION	DOC NO.	RANK	STCW REG.	DATE ISSUED	DATE EXPIRE
NATIONAL LICENCE					AUG 2016
FLAG STATE LICENCE 1					
FLAG STATE LICENCE 2					
COC NATIONAL					
TANKER					
FAMILIARIZATION					
CHEN. TANKER HIGHEST GRADE					
OIL TANKER HIGHEST GRADE					
LPG TANKER HIGHEST GRADE					
STCW% ENDORSEMENT					

RECORD OF PREVIOUS SERVICES

COMPANY	RANK	SHIP PARTICULARS					MAIN ENGINE POWER	TYPE	FROM	TO
		NAME	TYPE	FLAG	GRT	YEAR BUILT				
Educarion Inter-col	CAPT	Boym Atlantic	SHIPS	S.V.G	2152				SANTIC 24/7/19	

SUMMARY OF SEA SERVICE IN MONTHS FOR ALL CARRIER

RANK	BULK	CARGO	RO-RO	Q.I.TK	CHEMICAL TK	REEFER	CONTAINER	OTHER

SUMMARY OF EXPERIENCE ON ENGINE TYPE IN MONTHS FOR ALL CARRIER ENGINEERS APPLD AND

ENGINE TYPE	MAN	SULZER	B & W	PISL STICK	STEAM TURBINE	DIESEL	OTHER

COLLEGES/INSTITUTES

NAME OF INSTITUTION	COURSE ATTENDED	FROM	TO	QUALIFICATION
All Saint College Mtn Orion	SSC E HND	16/11/2014 13/11/2013	02/11/2016 04/02/16	SSC E HND

RECORDS OF PREVIOUS SERVICE

COMPANY	NAME	SHIP PARTICULARS			MAIN ENGINE		DATE	
		NAME	TYPE	FLAG	OWNER	TYPE	FROM	TO

Last Stop: NO

Details:

Have you been convicted before? NO

If yes, state reasons:

Last Stop: NO

Details:

Have you been convicted before? NO

If yes, state reasons:

ADO GA ABRABAMA EMANUEL

I declare under the information given here is correct to the best of my knowledge.

<u>Signature</u>	<u>Date</u>	<u>Left</u>	<u>Right</u>
<u>Ado Ga Emmanuel</u>	<u>18/03/2020</u>	<u>THUMB PRINT</u>	<u>THUMB PRINT</u>

OFFICIAL USE ONLY

VERIFICATION OFFICER (NAME)

XAde Asuguo, Ofcc (Mrs)DATE: 10/12/2018

Part 2:

VACCINE DOSE ADMINISTERED & AEFI

COVID-19 Dose	Product Name/Manufacturer Batch Number	Expiry Date	Date Given	Next Appointment	Any AEFI	Date of Onset of AEFI
Dose 1	<ul style="list-style-type: none"> • AstraZeneca/Oxford <input checked="" type="checkbox"/> • Johnson & Johnson <input type="checkbox"/> • Pfizer <input type="checkbox"/> <input type="checkbox"/> <p>210364</p>	10/21	25/10/21	04/12/21		
Dose 2	<ul style="list-style-type: none"> • AstraZeneca/Oxford <input checked="" type="checkbox"/> • Pfizer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	12/21	7/12/21	Completed		

1st Dose
Name of Health Officer: Mary Habibat
Signature: HABIBAT

2nd Dose
Name of Health Officer: Nwue Chukwudum C.
Signature: N.C.

**COVID-19
VACCINE
IS SAFE
AND
EFFECTIVE**

NATIONAL PRIMARY HEALTH CARE
DEVELOPMENT AGENCY

NG - RK89914104 OP


Client Copy
FEDERAL MINISTRY OF HEALTH
NATIONAL PRIMARY HEALTH CARE
DEVELOPMENT AGENCY
COVID-19 Vaccination Card

Part 1:
Basic Information

Card No.: Ajif INOtel
 Name: Adoga Abraham 28 M
 State: Lagos LGA: Age: 28 Sex: M
 Ward: Alayobusigba Settlement: New Berrick
 Health Facility: ONMC
 Name of Vaccinator: Joy Tidefor
 Phone No. of LGA DSNO: 08092334035





ELKINS MARINE

Elkins Marine Training International, USA certifies that on November 10, 2019

ADOGA ABRAHAM EMMANUEL

successfully completed the Elkins Marine Training International
International Maritime Organization, United States Coast Guard, and Nigeria approved
79 1/2-hour Global Maritime Distress & Safety System (GMDSS) General Operator's Certificate (GOC) course
and passed all examinations and competencies at Elkins Marine Training International (Nigeria), Ltd.

This certificate #02-6-2531 satisfies the regulatory requirements of:

United States Code 46 Code of Federal Regulation 46 CFR 11.305(a)(3)(viii);
46 CFR 11.307(a)(3)(viii); 46 CFR 11.309(a)(4)(iv); 46 CFR 11.311(a)(3)(ix); 46 CFR 11.313(a)(3)(ix); 46 CFR 11.315(a)(3)(vi);
46 CFR 11.319(a)(4)(ix), and Table A-IV/2 of the Seafarer's Training Certification and Watchkeeping (STCW) Code
as defined in the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers,
1978, as amended in 1995 by the International Maritime Organization.

Nweneri

Jele N. Nweneri
Managing Director & Examiner

D. David Byrd

J. David Byrd
President & Chief Executive Officer

**STCW
GMDSS / GOC
Certificate of Training**



STCW

**Automatic Radar Plotting Aids (ARPA)
Certificate of Training**

Elkins Marine Training International, USA certifies that on November 16, 2019

ADOGA ABRAHAM EMMANUEL

successfully completed the
International Maritime Organization and United States Coast Guard approved

Automatic Radar Plotting Aids (ARPA) Course
at Elkins Marine Training International (Nigeria), Ltd.

This certificate # 02-8-5122

satisfies the regulatory requirement of:

United States 46 Code of Federal Regulation 11.305(2)(v); 11.307(2)(vi); 11.309(2)(xiv); 11.309(2)(viii);
11.313(2)(viii); 11.315(2)(v); 11.317(2)(vii); 11.319(2)(viii); and 11.321(2)(vii), and Table A-11/1 of the
Seafarers' Training, Certification and Watchkeeping (STCW) Code as defined in the
International Convention on Standards of Training, Certification and Watchkeeping for Seafarers,
as amended in 2010 by the International Maritime Organization.

Nwosu

J. David Byrd

*Jeje N. Nwaneri
Managing Director & Examiner*

*J. David Byrd
President & Chief Executive Officer*



CHARKIN
MARITIME & OFFSHORE SAFETY CENTRE
www.charkincentre.com



CM020719251980

Certificate Number

Certificate of Training

This is to certify that

ADOGA ABRAHAM EMMANUEL

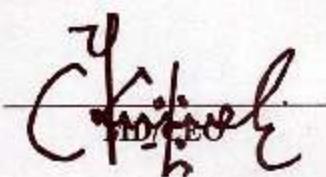
Date of Birth: 29-09-1994



Has Successfully Completed

PROFICIENCY IN ELECTRONIC CHART DISPLAY & INFORMATION SYSTEM (ECDIS)

And has met the standard of Competence as specified in SECTION A-II/1 & A-II/2, Table A-II/1 & Table A-II/2 of the STCW Convention as amended (including 2010 amendments) and in accordance with IMO Model Course 1.27. with duration of 40 hours.



15-09-2021

Issue Date



SIGNATURE OF INSTRUCTOR

14-09-2028

Expiry Date



N°05879



OMA BATCH NO. 596642

CERTIFICATE NO. 6642

COASTAL MARITIME ACADEMY

15B AWOLOWO ROAD, SOUTH WEST IKOYI,
LAGOS, NIGERIA.
E-mail: cmalagos@yahoo.com

OF BASIC OIL AND CHEMICAL TANKER CARGO OPERATIONS

This is to Certify that

ADOGA ABRAHAM EMMANUEL

Has successfully completed an approved training in **Basic Oil and Chemical Tanker Cargo Operations** in accordance with Table A-V/1-1-1 of the STCW Code and provisions of the revised STCW Convention (2010).

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

TRAINING COORDINATOR

SIGNATURE OF REGISTRAR



ANY ALTERATION INVALIDATES THIS CERTIFICATE

12TH - 16TH JUL, 2021
From To

SEAL AND DATE



No: 0006246



CMA BATCH NO: 158-6634

CERTIFICATE NO: 6634

COASTAL MARITIME ACADEMY

15B AWOLOWO ROAD, SOUTH WEST IKOYI,
LAGOS, NIGERIA.

E-mail: cmalagos@yahoo.com

STCW BASIC SAFETY TRAINING

This is to Certify that

ADOGA ABRAHAM EMMANUEL

Date of Birth: 29/09/1994

Discharge Book No:

Has successfully completed a training programme approved by the Nigerian Maritime Administration and Safety Agency (NIMASA), meeting the requirements laid down in

Personal Survival at Sea Techniques

Regulation VI/I and Section A - VI/I 2.1.1

Fire Prevention and Fire Fighting

Regulation VI/I and Section A - VI/I 2.1.2

Elementary First Aid

Regulation VI/I and Section A - VI/I 2.1.3

Personal Safety and Social Responsibilities

Regulation VI/I and Section A - VI/I 2.1.4

and has also met the additional criteria specified in the revised STCW Convention (2010) applicable to the issue of the certificate.

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

A handwritten signature in black ink, appearing to read "R. S. A." followed by a stylized surname.

SIGNATURE OF RECTOR

SIGNATURE OF REGISTRAR



12TH - 16TH JULY 2021
From..... To.....

SEAL AND DATE



ANY ALTERATION INVALIDATES THIS CERTIFICATE

Nº 001147



CMA BATCH NO. 113517

3517
CERTIFICATE NO.

COASTAL MARITIME ACADEMY

15B AWOLOWO ROAD, SOUTH WEST IKOYI,
LAGOS, NIGERIA.

E-mail: info@coastalmaritimeacademy.com
Website: www.coastalmaritimeacademy.com

Certificate

OF CREW SECURITY AWARENESS WITH DESIGNATED SECURITY DUTIES (ISPS CODE)

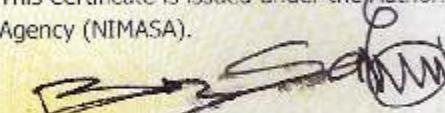
This is to Certify that

ADOGA ABRAHAM EMMANUEL

Has successfully completed an approved course required to comply with the provisions of the ISPS Code with **Security Awareness Training for Seafarers in accordance with SECTION A-VI/6, Table A-VI/6-1, A-VI/6-2 of the revised STCW convention (2010).**

The Candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).


TRAINING COORDINATOR


EXECUTIVE CHAIRMAN

30TH NOVEMBER, 2018
SEAL AND DATE ISSUE



ANY ALTERATION INVALIDATES THIS CERTIFICATE