Form OPS- 015/ Rev.03/ 27-07-2018

CREW EVALUATION REPORT

	Seafarer's Name : TUE Rank : OIL	OILER				Date of Report (dd/ Reporting Period			From : To :	25/4/2024 14/2/2023 25/4/2024 signing off vessel
	Reason for the resport.		☐ Midway though ☐ Reporting crew			w leaving	Commen			
			Exceler		Good	Fair	Poor (4)		Ide	entify Training Needs
1	Ability/Knowledge of J	Job			$\overline{\mathbf{v}}$					
2	Safety Consciousness Dependability&Integrity				$\overline{\mathcal{Q}}$					
3					$\overline{\mathcal{Q}}$					
4	Initiative				$\overline{\mathbf{v}}$					
5	Conduct				abla					
6	Ability to get on with o	thers			\checkmark					
7	Appearance (+ uniform				$ \mathbf{\nabla}$					
8	Sobriety				\checkmark					
9	English Language					$\overline{\mathbf{v}}$				
	Leadership (Officers)								•	
General Comments highlighting strengths / weaknesses: Master :										
Reporting Officer: He has a good performance and good worker										
	-employ : ☑ Yes			No No		Yes, Pr	ovided the f	follo	owing cond	ditions are met
_										
Acnowledge Seafarer's signature:.										
Fu	eporting Officer ull Name : SUDARDI ank : CE	ALIS	A)		Master Full Nat Capt S	THE PERSON NAMED IN	R	D	eceived by ate of Rece IBADI	

Distribution : Original - Office / Copy - Ship File