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F-NETI-354E

S.N. _____

PDE ASSESSMENT RESULTS FOR

Wiper

(Position)

Last name	First name	Middle name	Suffix	Age
Passport No.	Passport Expiry Date:			Medical Expiry Date:
Position Wiper				Application Date
Address/Company Name				Receipt No.

DOCUMENTARY ASSESSMENT	COMPLIANT	NON-COMPLIANT
1. 2pcs 2 x 2 picture		
2. Valid Medical Certificate		
3. Latest Passport		
4. Seaman's Identification Records (front page and pages with last entry)		
5. Seafarers with Designated Security Duties with Security Awareness Training (SDSD With SAT)		
6. Basic Training Certificate / BT- COP		
7. PSCRB Training Certificate / PSCRB -COP (IF ANY)		
8. Rating Forming Part of an Engineering Watch Training Certificate (IF ANY)		
9. Certificate of Proficiency For Rating Forming Part of an Engineering Watch (MARINA III/4)		

Result of Assessment:

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For submission of non-compliant documents

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Non-compliant documents were submitted and fully compliant

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Application is fully compliant

Assessor's Name and Signature _____

This is to certify that the name appearing above has (Passed / Failed) the documentary requirements.

Prepared by:

Reviewed by:

Approved by:

Assessor

Department / Section Head

General Manager