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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