TRAINING SHIP 'RAHAMAN'

(Recognised by the Dir. Gen. of Shipping, Ministry of Shipping Road Transport and Highways, Govt. of India)

SIR MOHAMED YUSUF SEAMEN WELFARE FOUNDATION

Registered under the societies Registration Act, 1860 (Act XXI of 1860) and Public Trust Act, 1950 (Maharashtra State) Reg. Off.: Jahaz Mahal Annexe, 170-K Samander Point. Estate. Worli, Mumbai 400 018.

APPLIC	CATION FORM FOR PRE-SEA GENERA	AL PURPOSE RATINGS (PSGPR)
	BATCHNO:	
Passport size	DATE OF COMMENCEMENT:	
Photograph with white shirt & light background	1) FULL NAME (Block letters):(A 2) NATIONALITY:(A 3) DATE OF BIRTH	AS STATED IN PASSPORT / SCHOOL LEAVING CERTIFICATE) PLACE OF BIRTH
4) PERMANENT ADDRES	(DD/MM/YYYY)	
E-MAIL:	PIN:	TEL: NO
5) ACADEMIC QUALIFICA	TIONS : SEAMEN WE	28
6) LAST SCHOOL / COLLE	00400	TARK TO BE
7) NAME OF LOCAL GUAF	RDIAN S S S S S S S S S S S S S S S S S S S	PINRELATIONSHIP :
FULL ADDRESS	DEEDS AND WORDS	A CONTRACTOR OF THE PARTY OF TH
E-MAIL:	PIN: 887D. 1910	TEL. NO
DATE :	SIGNATURE OF	RATING:
TSR:PSR:CHECKLIST1 CONDITIONS FOR ADMISSION:	(FOR OFFICE USE ONLY)	(iv) Age not more than 25 yrs. & not less than 171/2 yrs.
English, Mathematics & Scie English 40% in 10th /12th. O 12th standard (any stream) 40% aggregate. English 40% Mathematics & Science at 10 (Fitter / Machinist /Mechanic	R pass from government recognized board with at 10th / 12th but with subjects English, oth OR Pass in 2 year ITI course c/Welder/Turner) approved by agregate marks in final year of ITI & minimum . s). aving Certificate	on the date of commencement of training. (v) Medical Fitness Certificate from a Doctor Approved by DGS (Original) (vi) 20 copies of passport size and 4 stamp size Photographs with White Shirt & Light Background (vii) Fees paid Receipt
Course Officer :		
Received All original Certificates Name:	Signature of Candidate &	a Date
ıame	Signature of Candidate &	: Dait

UNDERTAKING BY THE RATING'S PARENT/LOCAL GUARDIAN:

To, The Principal, Training Ship "Rahaman" Nhava, Panvel Taluka, Dist. Raigad-410206 - Maharashtra

Sir,

I undertake to pay the training charges in full or installments as per the prescribed fee schedule. If I fail to make the aforesaid payments, and, if it is found that during the period of training my son/ward has deliberately flouted the rules and regulations of the Training Ship, the Disciplinary Committee of the Institution shall be at liberty to discontinue his training and ask him to leave the Training Ship at any time. I also give an undertaking that the Governing Council, Management, Principal or any other Foundation Staff will not be held responsible in any way whatsoever, for any accident or injury suffered by my son / ward during the course of his training at Nhava, or whilst going / returning from shore leave or whilst on shore leave.

Further I consent to any emergency medical treatment of my ward including hospitalisation which might become necessary, and I agree to pay for the same.

Yours faithfully,

Name & Signature of Parent / Local Guardian

Date:		
Dait.		

e:	MEN
Uniform items to be supplied / stitched by the Training Ship (a) 3 white shirts (half sleeves) (b) 3 white shorts (c) 2 pairs white socks	191(i) 1 pair black dress shoes (j) 1 pair white sports shoes (k) Black shoe polish & brush (l) Geometry box (m) 1 navy blue & 1 white cotton Pugree for Sikhs only
List A items supplied :	List B items brought :
Rating's Signature :	Instructor's Signature :
LIST C:	
(a) Dormitories / Quarters / Toilets are in clean condition(c) Water supply lines & taps checked & in good order.	(b) All lights and fans in working condition.(d) Rating Recreation Room Television in working order.
Rating's Signature :	Housekeeper's Signature :