PSR

TSR:ALL:APLC:06 Pg. 1 of 2

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.

APPLI	CATION FORM FOR PRI	RE-SEA GENERAL PURPOSE RATINGS (PSGPR)
	BATCHNO:	
Decement size	DATEOFCOM	MMENCEMENT:
Passport size Photograph with white shirt & light background		Block letters):(AS STATED IN PASSPORT / SCHOOL LEAVING CERTIFICATE)
	NATIONALITY: 3) DATE OF BIRTH	
4) PERMANENT ADDRE	SSS:	(DD/MM/YYYY)
E-MAIL:		PIN:TEL. NO
5) ACADEMIC QUALIFICA	ATIONS :	F SEAMEN WE,
6) LAST SCHOOL / COLL	EGE NAME & ADDRESS:	O H O O O
	J J OM 9	PIN
7) NAME OF LOCAL GUA	RDIAN	RELATIONSHIP :
FULL ADDRESS	S E	G SHIP RAHAM
E-MAIL:	PI	PIN: TEL. NO.
DATE :		SIGNATURE OF RATING:
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Science as Subject & (Original with 3 pho	in SSC or equivalent aggregate marks with Maths 40% in English in either X or X tocopies). Ilege Leaving Certificate	
Nos. (ii), (iii) originals retain	ned with T.S. Rahaman	Date:
Received All original Cert	ificates	
Name:	S	Signature of Candidate & Date

#### UNDERTAKING BY THE RATING'S PARENT/LOCAL GUARDIAN:

To,

The Captain Superintendent, 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, Captain Superintendent 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.

SEAMEN W.

Yours faithfully,

Name &	Signature	of Parent /	Local	Guardian.

Date:		
Date:		

FOR OFFIC	CE USE ONLY
TSR: PSR: CHECKLIST 2  LIST A: Uniform items to be supplied / stitched by the Training Ship (a) 3 white shirts (half sleeves) (b) 3 white shorts (c) 2 pairs black socks (d) 2 pairs white socks (g) 1 blue beret (h) 2 sports shorts (black) (i) 2 pairs white stockings (j) 2 navy blue boiler suits (k) 1 yellow hard hat (supplied during working hours) (l) 3 coloured 'T' shirt with Training Ship's crest (m) 1 white belt with buckle (n) 1 pair black safety shoes (o) 1 pair safety gloves (p) 2 white bath towels and 2 white hand towels (q) 4 Bedsheets, 2 Pillow covers, 1 Mattress Cover (r) Seamanship Primer - Capt. J. Dinger (s) 6 long Note books & 2 short note books (t) 3 Journals (u) 2 Oxford work books	LIST B:  The Rating is required to bring the following items:  (a) 2 pairs Civilian clothes  (b) 1 woollen jersey (seasonal)
List A items supplied :	List B items brought :
Rating's Signature :	Instructor's Signature :
LIST C:	
<ul><li>(a) Dormitories / Quarters / Toilets are in clean condition</li><li>(c) Water supply lines &amp; taps checked &amp; in good order.</li></ul>	<ul><li>(b) All lights and fans in working condition.</li><li>(d) Rating Recreation Room Television in working order.</li></ul>
Rating's Signature :	Housekeener's Signature