STANDARD OPERATING PROCEDURE FOR EXTRA MASTER

- 1) Candidate to download Form 29 from the website of MMD, Mumbai (www.mmd.gov.in)
- 2) Candidate to fill up Form 29.
- 3) Assessment fees of Rs. 3000/- to be paid in Bharatkosh.
- 4) Candidates to attach the documents as per the checklist for Extra Master uploaded on MMD, Mumbai website (www.mmd.gov.in).
- 5) Candidates to send the duly filled up form along with the relevant documents as per the checklist to following address:

MERCANTILE MARINE DEPARTMENT,

1ST FLOOR, NAV BHAVAN BUILDING, 10 R.K. MARG, BALLARD ESTATE, MUMBAI – 400001

Form should reach MMD, Mumbai 10 days before the commencement of the examination.

- 6) The candidates will be informed by e-mail regarding approval of assessment. E-mail updated on form 29 by the candidate should be active.
- 7) Once the candidate receives the e-mail for Approval of Assessment, the candidate can book the seat for the examination after payment of fees of Rs. 8000/- per Semester in Bharatkosh.
- 8) There are 3 paper per semester. The candidate should book for all 3 papers for his first attempt in all 3 semester.
- 9) The receipt of Bharatkosh to be sent by email to MMD, Mumbai (<u>examn.mum-mmd@gov.in</u>) at least 5 days before the examination.
- 10) Admit cards will be scanned and forwarded by email to the candidates. The original Admit cards will be issued to the candidates on the day of the examination.
- 11) The candidates should report at the Examination Centre, Nav Bhavan Bldg., MMD, Mumbai on the day of examination as per the schedule.
- 12) The candidate should bring original CDC / CoC / Passport for verification on the day of the examination.



5. Address of the Institution

FORM 29

(See Rule 72)

GOVERNMENT OF INDIA MINISTRY OF SURFACE TRANSPORT DIRECTORATE GENERAL OF SHIPPING

Application for Examination and Assessment for certificates under Merchant Shipping (Standards of Training, Certification and Watch-keeping for Seafarers)

Application No. :		Received Date:
A. Grade of Examination	¥)	
Place of Examination	9	
Full Name (Block letters)		
2. Permanent Address	10	
3 Present Address	¥i.	
4. Telephone Number (with STD Code)	\$	
Nationality (Proof to be produced)	E.	
6. Passport Number	E	
7. Date and Place of Issue	Ę	
 Continuous Discharge Certificate (C.D.C) Number 	ĝ ŝ	
9. Date and Place of Issue		
Date of Birth (Proof to be produced)	1	
11.Place of Birth	183	
12.Personal Identification marks	*	
13. INDos No		
14. Email Id	127	
lote : Any Person who makes, caus	ses to be made or	assists in making any false representation for the purpose of obtaining for himself /
B. DETAILS OF SCHOLAS (Separate sheets must b		N ii
1.Scholastic Education Lev	vel :	
2.Principal Subjects	1	
3. Year of Passing	ž	
4. School/College/ Board	*	

1. Training										
2. Address	of the Instit	ution								
3. Attended	From									
4. Result										
5. Courses	Attended									
D1. DETAIL	S OF SEA-	GOING SERVICE	(FOR DE	CK DEPAF	RTMENT F	PERSONNE	L):			
Name	Туре	Gross Tonnage	Port of Registry/ Official	Trade: NCV/ FG/ Coastal	Rank	From	То	Peri	od	Remar
of Ship			Number	Coastai				Months	Days	
						2		x		
REPORT	ON STRUC	TURED ON-BOA	RD TRAIN	IING :		1				
Phase No	0	Date Of	Nam	ne of Maste	r	Details O	f Certifica	ate Of C	ompeta	ncy
										\$1
DEPORT	OE DESIGN	IATED COMPAN	V-TD A INII	IC DEFICE	=D =					
		NATED COMPAN	Y TRAINII	NG OFFICE	ER :					
REPORT Signature		NATED COMPAN	Y TRAINII	NG OFFICE	ER :					
		NATED COMPAN	Y-TRAINII	NG OFFICE		Certificate N	lo.			
Signature Name	9 №	NATED COMPAN				Certificate N	lo.			
Signature Name	DF HEAD O					Certificate N	lo.			
Signature Name REPORT (DF HEAD O				<	Certificate N				
Signature Name REPORT (DF HEAD O				<					

F. REPORT OF ASSESSMENT CENTRE:

POST-SEA APPROVED EDUCATION AND TRAINING AT APPROVED INSTITUTION LEVEL 2M(Operational)/1M&M(Management)

Function /Part	Institution	From	То	Remarks

F-2 REMARKS OF HEAD OF ASSESSMENT CENTRE:

ELIGIBILTY FOR OPERATIONAL/MANAGEMENT LEVEL(Phase I & II)
ELIGIBILITY FOR WRITTEN FUNCTION EXTRA MASTER

Signature

Name

Official Stamp:

G. PARTICULARS OF STCW CONVENTIONS MODULAR COURSES (POST-SEA):

Sr.	Courses	STCW Reg./ STCW Code No.	Cert No.	Approved Institution	Per	iod	Validity
No.		STOVV Code No.			From	То	

H. PREVIOUS CERTIFICATE (Issued in India or elsewhere, If none state so):

Number	Certificate	01	Place & date of	Place & date of Examination		If any time suspended or cancelled, state		
	Details	Class /Grade	Examination	Issue Date	Court of Authority	Date	Cause	

I. DECLARATION TO BE MADE BY THE CANDIDATE:

I hereby declare that the particulars contained in the form are correct and true to the best of my knowledge and belief and that the papers enumerated and sent with this form are true and genuine documents given and signed by the person whose name appears on them. I further declare that Section D contains a true and correct account of my sea-going service without exception and I make this declaration conscientiously believing the

The above declaration was signed in my presence.

Signature of the candidate

			Mercantile	Marine Departme	ntDistrict
J. REQUE	ST FOR ALLO	MENT OF SEATS	FOR EXAMINATION:		
K 1. Sight	Test :Date of E	Examination :	Result	Signatu	re of Examiner
K 2. RESU	LT OF EXAMIN	NATION :(for offic	cial purpose only) :		
REPORT	OF EXAMINAT	TION CENTRE			
1. I her	OF EXAMINAT	has sat	tisfactory produced testimonials aining as required for the grade.		going service/watch
 I here keep The Certification 	OF EXAMINATeby certify that ing service/app	has saf		g Standards (Stan	dards of Training
I here keep The Certifications	OF EXAMINAT beby certify that ing service/app candidate comp fication and Wa	has sate trace has sate has with the examinated has been been been been been been been bee	aining as required for the grade. ination of the Merchant Shipping	g Standards (Stan de of Extra Maste	dards of Training
I here keep The Certifications	OF EXAMINAT beby certify that ing service/app candidate comp fication and Wa	has sate trace has sate has with the examinated has been been been been been been been bee	aining as required for the grade. ination of the Merchant Shipping afarers) Rules, 1998 for the gra	g Standards (Stan de of Extra Maste	dards of Training

Examiner of Masters and Mates

	by certify thate/Watch Keeping S		satisfactory prod	duced his testir	nonials and proof of Sea-going
2. The ca Seafar	ndidate complies w ers) Rules, 1998 for	ith the Merchant S r the grade of Exti	Shipping (Standara Master of a F	ards of Training oreign Going s	g Certification and Watch-keeping for ship
3. The ca	ndidate has passed	the examination		as under	
riiase	Levei	Written	Function	Oral	Sign. of Examiner with Remark
The candid provisional	ate meets the requirer certificate issued No	ments be eligible to	be issued the Ce	rtificate of Comp	etency as
					Examiner of Masters and Mates Mercantile Marine Department
FINAL ASS	ESSMENT PRIOR	CERTIFICATION	J		
FINAL ASS	ESSMENT PRIOR	CERTIFICATION	V		
		CERTIFICATION	V		
Medical Pre-Sea T		CERTIFICATION	V		
Medical Pre-Sea T Structured	raining	CERTIFICATION	V		
Medical Pre-Sea T Structured Sea-Servir	raining on Board Training		V		
Medical Pre-Sea T Structured Sea-Servir	raining on Board Training ce Requirement amination (Assessr				
Medical Pre-Sea T Structured Sea-Servi Written Ex	raining on Board Training ce Requirement amination (Assessr				
Medical Pre-Sea T Structured Sea-Servi Written Ex Oral Asses	raining on Board Training ce Requirement amination (Assessr				
Medical Pre-Sea T Structured Sea-Servin Written Ex Oral Asses Modular C Eligibility Certi	raining on Board Training ce Requirement amination (Assessr	ment)		as recommende	d by Mercantile Marine Department may be issue
Medical Pre-Sea T Structured Sea-Servin Written Ex Oral Asses Modular C Eligibility Certi	raining on Board Training ce Requirement amination (Assessr ssment ourses	ment)	nd Mates	as recommende	d by Mercantile Marine Department may be issue

M. FOR THE CHIEF EXAMINER OF MASTERS AND MASTES

EXTRA MASTER (FG) CHECK LIST

MERCANTILE MARINE DEPARTMENT, MUMBAI DOCUMENTS TO BE SUBMITTED FOR ASSESSMENT OF ELIGIBILITY

IVAIN	TE: INDOS NO_		
SR. NO.	PARTICULARS	ENCLOSED PHOTOCOPY YES/NO/NA	ORIGINAL VERIFIED BY THE PRINCIPAL YES/NO/NA
1	Form 29 - Print out of application (Available on MMD's wesbite www.mmd.gov.in)		
2	Assessment payment receipt of Bharat Kosh (Rs. 3000/-)		
3	CDC relevant pages copies	1	
4	Passport relevant pages copies		
5	Master F.G. COC (issue by Government of India) copy	£	
6	Two passport size photographs on white background		

60		
Candidate's	Signature:.	