



**NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY**

**APPLICATION FOR EXAMINATION LEADING TO THE ISSUANCE OF A  
CERTIFICATE OF COMPETENCY STCW’78, AS AMENDED FOR DECK/ENGINEER  
OFFICERS**

**IMPORTANT** please complete this form in **BLOCK LETTERS**, if a section is not relevant to your application, please enter **NIL**

**1. PERSONAL DETAILS**

|                      |     |                |                    |  |                 |
|----------------------|-----|----------------|--------------------|--|-----------------|
| SURNAME :            |     | OTHER NAMES :  |                    |  |                 |
| DATE OF BIRTH:       | DAY | MONTH          | YEAR               |  | PLACE OF BIRTH: |
|                      |     |                |                    |  |                 |
| NATIONALITY:         |     |                | DISCHARGE BOOK NO: |  |                 |
| RESIDENTIAL ADDRESS: |     |                |                    |  |                 |
| CITY:                |     | STATE:         |                    |  |                 |
| TEL:                 |     | EMAIL ADDRESS: |                    |  |                 |

**APPLIED FOR:**

| CAPACITY | POWER LIMITS<br>(KW) | TONNAGE LIMITS<br>(GT) | AREA<br>LIMITATION |
|----------|----------------------|------------------------|--------------------|
|          |                      |                        |                    |

**Tick as appropriate**

1<sup>st</sup> attempt

Re-sit  PREVIOUS DATE OF EXAM (IF ANY): .....

Referral (Indicate Subject): .....

**ELIGIBILITY NOTICE NO:**..... **DATE ISSUED**.....

**EXAMINATION FEE RECEIPT NO:** .....

**INDICATE DATE FOR EXAMINATION:**..... (PLEASE REFER TO EXAM CALENDAR FOR THE YEAR)

**DOCUMENTS TO BE ATTACHED**

Photocopies of the following documents must be with this application.

1. Examination fees receipt
2. Notice of Eligibility
3. Evidence of Completion / attendance of preparatory course certificate or previous Exams result slip.

In addition, enclose two color passport photographs with your name in **BLOCK LETTERS** and signature written at the back.

**SIGNATURE AND DECLARATION BY APPLICANTS**

I declare that the information contained in this application is to the best of my knowledge true and complete. I also declare that the documents submitted along with this form are genuine and signed by person(s) who are authorized to do so.

**Signature of applicant:.....Date:.....**

**NOTE:** Completed examination forms with evidence of payment for the Examination **MUST** be returned to;

**THE DIRECTOR,  
MARITIME SAFETY AND SEAFARERS STANDARD DEPARTMENT,  
KIRIKIRI,  
LAGOS. NIGERIA.  
Email: [msssd@nimasa.gov.ng](mailto:msssd@nimasa.gov.ng)**

To reach him **NOT** later than One Month before the date of examination.

