



**A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED**  
**Integrated Management System Manual**

**Form C026:Seagoing Personnel Application and Interview Record**

**Part A. APPLICATION No.**

**PERSONAL DATA**

Applied for the position of: .....	PHOTO
Surname: .....	Forename: .....
Father's name: .....	Mother's name: .....
Date of birth: .....	Place of birth: .....
Over 18 years of age: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married	Nationality: .....
Home address: .....	
Tel.: .....	Tel.: ..... e-mail: .....
Next of kin* <sup>1</sup> : .....	
Surname* .....	Forename: .....
Home address*: .....	
Dependants (number)*: .....	
Sons*: .....	
Daughters*: .....	

DOCUMENTS	NUMBER	ISSUING AUTHORITY	Date Issued	Expiry Date
Passport				
Seaman's book (National)				
Seaman's book (Flag Administration)				
USA Visa				
MCV Maritime Crew Visa				
S T C W Endorsement/ COC				
Medical Fitness Certificate				
Yellow Fever Vaccination				

**QUALIFICATIONS (ref. to IMSM Ch.6 Appendix V, as applicable)**

CERTIFICATES	YES	NO	ISSUING AUTHORITY	Date Issued	Expiry Date
Certificate of competence / licence					
Certificate of competence / Endorsement (Flag Administration)					
Navigational watch keeping A-II/1					
Navigational watch keeping A-II/2					
Navigational watch keeping A-II/4					
Engine Room watch keeping A-III/1					
Engine Room watch keeping A-III/2					
Engine Room watch keeping A-III/4					
GMDSS radio operators A-IV/2					
Basic training A-VI/1-1 to 1-4					
Proficiency in surv.craft & RB other than FRB A-VI/2-1					
Advanced fire fighting A-VI/3-1					

<sup>1</sup> Fields marked with \* are optional



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Medical care A-VI/4-1,2					
Medical First Aid					
Ship Security Officer					
Ship Security Awareness (SSA)					
Bridge Resource/Team Management (BRM/BTM)					
Engine Resource Management (ERM)					
Risk Assessment					
Maritime English					
ECDIS					
<b>OTHER CERTIFICATES</b>	<b>YES</b>	<b>NO</b>	<b>ISSUING AUTHORITY</b>	<b>Date Issued</b>	<b>Expiry Date</b>
USA Visa					
Cy Endorsement					
CY SISBR					
MCV ( Australian)					
ECP					

**Training needs** If NO list the certificates the applicant does not hold in the following section:

Native language: \_\_\_\_\_

English:  Good  Basic  Maritime English Cert (Officer / Rating)

Other languages: \_\_\_\_\_

#### PREVIOUS SEA SERVICE

SHIP'S NAME	TYPE	ENGINE	DWT / BHP	OWNER	RANK	SERVICE TIME		REASON OF SIGN-OFF
						DATE ON	DATE OFF	

#### PRINCIPLES OF PROCESSING:

A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED will process the personal data you provide under this seagoing personnel application form in accordance with the following principles:

Lawfulness, Fairness, Transparency: Personal data is processed lawfully, fairly and in a transparent manner.



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**Purpose Limitation:** Personal data is collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes.

**Data Minimization:** Processing relates to data that is adequate, relevant, and limited to what is necessary in relation to the purposes for which they are processed.

**Accuracy:** Personal data is accurate. Every reasonable step is taken to ensure that any personal data that are inaccurate are rectified without delay.

**Storage Limitation:** Personal data is held for no longer than is necessary for the purposes and scope of processing, unless legal obligations require otherwise.

**Confidentiality and Integrity:** Personal data is processed in a manner that ensures appropriate security, including protection against unauthorized and unlawful processing, access, loss etc.

**Accountability:** A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED complies with transparent data protection processing and adhere to its legal obligations in relation to data protection and privacy

A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED will only keep your personal data only for as long as is necessary to examine and manage your seagoing personnel application. Specifically:

Application forms will be kept by A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED as per IMS procedures.

Nevertheless, there may be times that A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED are required to keep your personal data for longer time periods due to a legal obligation we need to adhere to.

#### **Your rights under the General Data Protection Regulation:**

You can request to access your personal data that we hold about you, the use we make of it, including any transfers. You also have the right to data portability.

If there is any change in your personal data that we hold about you, or believe that your data is inaccurate or incomplete, you have the right to request from us to correct it.

You also have the right to request from us to erase your personal data without undue delay if we no longer need to hold or process it under another legal obligation.

You can object and/or restrict the use of your personal data for purposes other than those set out above, unless we have a compelling legitimate reason for processing.

You can ask us to transfer your personal data to another party.

In the unlikely event that there is a data breach that involves your personal data you will be notified about it and reserve the right to lodge a complaint with the supervisory authority.

If you wish to exercise any of the aforementioned rights, please do so in writing by emailing us at [aen@aenomikos.gr](mailto:aen@aenomikos.gr)

Please keep in mind that in order to address your requests, we may need to forward them on to third parties who are involved in the processing of your personal data on our behalf.



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I acknowledge that under the General Data Protection Regulation – GDPR (EU 2016/679), personal data can only be gathered under strict conditions and in accordance with the grounds of lawful processing. With this provision of my personal data, I expressly and unambiguously understand that the processing of my personal data by A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED is necessary for the review of my seagoing personnel application and the consequent performance of my seafaring contract. I hereby confirm that I have no objection to the processing by A.E. NOMIKOS SHIPPING INVESTMENTS LIMITED and by any other partner or interested party of my personal data where the transfer is necessary to fulfil the requirements of the operation for which the information was provided.

**APPLICANT (NAME):** ..... **SIGNATURE** ..... **DATE** .....

<b>CREW MANAGER APPLICATION REVIEW</b> ( <i>application's validity to be reviewed prior each employment</i> )		
<b>NAME</b>	<b>DATE</b>	<b>SIGNATURE</b>



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**Part B. INTERVIEW FORM**

*ONLY for the accepted applicants. Interview will be carried out by the Department Managers or their deputies.*

**SEAFARER'S NAME:**

**RANK:**

**INTERVIEW DATE:**

**CREW MANAGER / MANNING AGENT**

Appearance.

Personality.

Contract period.

Nautical college / year graduated. (APPLICABLE FOR MASTER AND SENIOR OFFICERS)

Previous companies employed.

Type of vessels.

Training courses on top of STCW.

Knowledge of English language (interview is conducted in English language).

Personal Survival Techniques / Fire Prevention and Fire Fighting (APPLICABLE FOR RATINGS)

Elementary First Aid, Personal Safety and Social Relationships (APPLICABLE FOR RATINGS)

Salaries and other benefits.

Uniforms and Insignia.

Which are your views on health, safety, security, quality and environmental policy (expand)?

Which are your views on D& A policy?

Why did you have short contract duration with previous company (where applicable)?

What does the term DPA mean and which are his responsibilities?

Which are your views on Safety Committee meetings and how frequently should they be conducted?

Have you experienced any accidents? What lessons have you learned?

How would you ensure teamwork onboard?

When would you be available?

Have you any definite plans for your career?

Have you previously worked in multinational workforce?

Have you experienced any difficulties on this?

Do you believe that you are obliged to make suggestion for improvement of the Company's operations / performance?

Which particular aspects of work are you consider harder/more stressful?

Would you expect your wife / family to travel with you?

Have you experienced any medical operation / serious illness in the last 12 months?

Is there any possibility to undergo any medical operation in the next 12 months?

**MANNING AGENT** NAME/SIGNATURE .....

**DATE** .....



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**REFERENCES/INFORMATION, ETC. FROM PREVIOUS EMPLOYERS** (to be completed by Crew Manager/Manning agent)

<b>CREW MANAGER</b> NAME/SIGNATURE _____	<b>ACCEPTED</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>COMMENTS</b> _____	<b>DATE</b> _____

**OFFICERS ARE TO BE INTERVIEWED ON SPECIFIC TOPICS AS DESCRIBED IN SMM CH.6 APPENDIX I. INTERVIEWERS TO SIGN BELOW AS APPLICABLE:**

<b>2. COMPANY DEPARTMENTS</b>	
<b>DPA</b> NAME/SIGNATURE _____	<b>ACCEPTED</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>COMMENTS</b> _____	<b>DATE</b> _____
<b>TECHNICAL</b> NAME/POSITION/SIGNATURE _____	<b>ACCEPTED</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>COMMENTS</b> _____	<b>DATE</b> _____
<b>OPERATIONS</b> NAME/POSITION/SIGNATURE _____	<b>ACCEPTED</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>COMMENTS</b> _____	<b>DATE</b> _____
<b>MARINE SUPERINTENDANT</b> SIGNATURE _____	<b>ACCEPTED</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>COMMENTS</b> _____	<b>DATE</b> _____

**Note:** 1) Any comments shall be recorded in the relevant fields      2) Final approval as per Table 1 of IMS Ch.6

<b>5. CERTIFICATES' AUTHENTICITY CHECK</b> <small>Completed by the Crew Manager, when recruitment is conducted directly by the Company. Completed by the Manning Agent, when the recruitment is conducted by the Manning Agency and verified by the Crew Department.</small>	
Authenticity check conducted for certificates:	
<b>CONDUCTED BY</b> MANNING AGENT (Name/Position) _____	
<b>DATE</b> _____	<b>RESULTS</b> <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory
<b>VERIFIED BY</b> CREW MANAGER (Name) _____	
<b>DATE</b> _____	<b>RESULTS</b> <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory

<b>6. MEDICAL EXAMINATIONS</b> <small>TO BE CONDUCTED PRIOR TO SEAFARER'S ENGAGEMENT</small>
<b>MEDICAL EXAMINATIONS AND D&amp;A TEST COMPLETED SATISFACTORY?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO