



## ST. VINCENT AND THE GRENADINES MARITIME ADMINISTRATION

### APPLICATION FOR STCW ENDORSEMENT / SEAMAN'S BOOK GENERAL INFORMATION AND INSTRUCTIONS

Please read carefully :

1. Print legibly or typewrite all information in English. **Failure to correctly complete this application or to submit the required supporting documents may result in rejection of this application or delay in its processing.** If the documents presented are not in English Language, a certified English translation of the documents must be submitted. Priority is given to Applications received by email. Applications are valid one year.
2. Applications must be submitted to: THE COMMISSIONER FOR MARITIME AFFAIRS:

**Geneva Office**

8, Avenue Frontenex  
CH – 1207 Geneva  
Phone: +41 227076300  
Telefax: +41 227076349  
E-mail: stcw.geneva@svg-marad.com

**Monaco Office**

Monte Carlo Sun E/F  
74, Boulevard d'Italie  
MC-98000 Monaco  
Phone: +377 93 10 44 50  
Telefax: +377 93 10 44 99  
E-mail: stcw.monaco@svg-marad.com

**Piraeus Office**

Vincenian house  
8 Kantharou & Sachtouri Street  
GR-185 37 Piraeus  
Phone: +30 210 4286976  
Telefax: +30 210 4185184  
E-mail: cons\_svg@hol.gr

3. The following documents should be submitted with this Application Form:
  - A) **Passport photographs:**

For STCW Endorsement and Seaman's Book: Recent scanned photo (JPG format) of the applicant, passport size (3.5 cm x 4.5 cm).
  - B) **Identity document:**
    - (1) A valid passport;
    - (2) A valid seaman's document issued by another Maritime Administration or a letter of commitment of employment from a shipping company for service on board a St. Vincent and the Grenadines merchant vessel;
    - (3) A valid Licence of Competence with the STCW endorsement and GMDSS Certificate for Navigational Officers together with supporting documents: Basic Training and Instructions (VI/1), Proficiency Survival Craft and Rescue Boats (VI/2), Advanced Fire Fighting (VI/3) and Medical First Aid on board a Ship (VI/4).
  - C) **Revalidations/Extensions** – Applications for renewal should include a copy of the extension of the validity of the national endorsement, a valid medical fitness certificate, a valid passport, new application form and a recent scanned photo (JPG format) of the applicant, passport size (3.5 cm x 4.5 cm).
  - D) **Medical requirements** - Applicants, other than stated below, should have a physical examination reported on a medical form issued by a licenced physician and valid for 2 (two) years.



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4. The Seaman's Book conforms to the requirements of the International Labour Organisation's Convention No. 108 (Seafarer's Identity Documents Convention, 1958) and the MLC 2006. It is issued to seafarers of Vincentian vessels for use when travelling to or from an assigned vessel and for records of employment or pursuant to instructions from the Master of such a vessel. Other uses of the book must be in conformity with Vincentian regulations. I.L.O. Convention No. 108 does not in any way restrict the right of a member nation from preventing any particular individual from entering or remaining in its territory.

5. **Fees:** Payments should be made by transfer as follows:

- Endorsement of Certificate of Competency for Master or Officers, US\$ 150.-
- Endorsement of Certificate of Competency for GMDSS, US\$ 100.-
- Endorsement of Certificate of Proficiency for Tanker (Oil, Chemical, Liquefied Gas), US\$ 75.-
- Seaman's Book, US\$ 100.-
- Penalty for Forged Licences US\$ 500.- Penalty for Forged SVG Endorsements US\$ 3,000.-+ one year imprisonment.
- Revalidation/Extension of SVG Endorsements US\$ 100.- (may be performed by the same office which issued the SVG Endorsement **and** upon receipt of the extension of the validity of the national document).

To:

CMB Monaco  
23, Avenue de la Costa.MC-98000 MONACO  
In favour of: ST. VINCENT SHIPPING SERVICES LIMITED  
Account No. 0676270  
IBAN No: MC58 1756 9000 0106 7627 0000 265  
Swift: CMBMMCMXXX Clearing: 17569  
Correspondent Bank: JP Morgan Chase Bank NA  
SWIFT CODE: CHASUS33XXX

Documents sent upon receipt of payment.

All documentation will be forwarded to the mailing address as indicated.

6. St. Vincent and the Grenadines Maritime Administration processes your personal data in compliance with the EU General Data Protection Regulation (GDPR) and all applicable National Data Protection Laws and Regulations.

To be fully transparent and provide you with detailed information relating to the protection of your personal data, we published our [data protection policy](#).

This includes :

- Clarity on which data we have, how we use it and why we need it.
- Information about your rights and how you can exercise them.
- Details of who to contact if you have any questions or concerns.

We invite you to read our data protection policy which is available on our website:

[www.svg-marad.com/data-protection-policy.asp](http://www.svg-marad.com/data-protection-policy.asp)



ST. VINCENT AND THE GRENADINES  
MARITIME ADMINISTRATION

APPLICATION FOR  STCW ENDORSEMENT (Mandatory for all officers)  
 SEAMAN'S BOOK (Mandatory for all seamen)

<input type="checkbox"/> New Application	<input type="checkbox"/> Revalidation of Endorsement	Vessel Name: _____	
<b>I request the recognition of the competency and/or the proficiency as follows:</b>			
<input type="checkbox"/> Master, STCW A-II/2, II/3 <input type="checkbox"/> Chief Mate, STCW A-II/2 <input type="checkbox"/> Officer i/c Navigational Watch, STCW A-II/1 <input type="checkbox"/> GMDSS Radio Operator, STCW A-IV/2 <input type="checkbox"/> Alternative Certification, STCW A-VII/1	<input type="checkbox"/> Chief Engineer, STCW A-III/2, III/3 <input type="checkbox"/> Second Engineer, STCW A-III/2, III/3 <input type="checkbox"/> Officer i/c Engineering Watch, STCW A-III/1 <input type="checkbox"/> Electro-technical Officer, STCW A-III/6	<input type="checkbox"/> Oil Tanker, STCW A-V/1 <input type="checkbox"/> Chemical Tanker, STCW A-V/1 <input type="checkbox"/> Liquefied Gas Tanker, STCW A-V/1	
<b>1. Particulars of Seafarer :</b> Last Name / Family Name:		First Name (Given Name):	Middle Name :
Date of Birth:	Place of Birth:	Citizenship:	
Height: cm.	Colour of eyes:	Colour of hair:	
<b>2. Contact details (Seafarer)</b>		<b>3. Address of the invoice:</b>	
Home Address (Street, City & Country) :		Company, Street, City & Country :	
In case of emergency notify: Full name: Relationship: Address:			
Address where the Certificate is to be forwarded :		Delivery by:	Special Courier
		<input type="checkbox"/> Ordinary mail	<input type="checkbox"/> Europe US\$ 130 <input type="checkbox"/> Other Destination US\$ 170
<b>4. Copy of documents that should accompany this application (see procedure):</b>		<b>5. Copy of endorsements (if applicable) :</b>	
<input type="checkbox"/> Certificate of Competence <input type="checkbox"/> STCW Endorsement <input type="checkbox"/> Seaman's book <input type="checkbox"/> Passport <input type="checkbox"/> Medical Certificate issued on:	<input type="checkbox"/> Recent scanned photo (JPG format) <input type="checkbox"/> Basic Safety Training & Instructions (VI/1) <input type="checkbox"/> Proficiency Survival Craft & Rescue Boats (VI/2) <input type="checkbox"/> Advanced Fire Fighting (VI/3) <input type="checkbox"/> Medical 1 <sup>st</sup> Aid on board ship (VI/4) <input type="checkbox"/> Rating (Navigational Watch) (II/4) <input type="checkbox"/> Rating (Able Seafarer Deck) (II/5) <input type="checkbox"/> Rating (Engine Room Watch) (III/4) <input type="checkbox"/> Rating (Able Seafarer Engine) (III/5) <input type="checkbox"/> Rating (Electro-Technical) (III/7) <input type="checkbox"/> Ship Security Officer (VI/5) <input type="checkbox"/> Security Tr.(VI/6)	<input type="checkbox"/> GMDSS (IV/2) <input type="checkbox"/> Oil Tanker (V/1) <input type="checkbox"/> Chemical Tanker (V/1) <input type="checkbox"/> Liquefied Gas Tanker (V/1) <input type="checkbox"/> Ro-Ro Passenger Ships (V/2) <input type="checkbox"/> Passenger Ships Other Than Ro-Ro (V/3)	
<b>6. The following declaration should be completed and signed by the Manager / Owner.</b>			
The undersigned declares that the officer described in this application, and whose documents or copies are attached, is proficient in spoken and written English to a standard sufficient for service on a St Vincent and the Grenadines ship and necessary for the function to be performed on board. Knowledge of Maritime Legislation of St. Vincent and the Grenadines for Masters and Officers serving at Management level: For designated Officers, the undersigned declares that the officer whose particulars are given in this form is competent and has knowledge of St. Vincent and the Grenadines Shipping Legislation and its application. (Shipping Act 2004 Part VI, Section 103) (Shipping Act 2004, Part VI, Sections 75-132)			
<b>ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT</b>			
Date of Application:	Name and Signature of Manager / Owner		Signature of Applicant