# NOTICE MUMBAI MMD

The Written booking for Extra Master Part-C Examination to be conducted in Feb-2021 will be carried out on 27/01/2021 & 28/01/2021.

The Standard Operating Procedure (SOP) is attached for information.

(Capt. Anish Joseph)

Examiner of Master & Mates

**Mercantile Marine Department** 

Mumbai

### STANDARD OPERATING PROCEDURE FOR EXTRA MASTER

- 1) Candidate to fill up Form 29 (attached).
- 2) Assessment fees of Rs. 3000/- to be paid in Bharatkosh.
- 3) Candidates to attach the documents as per the checklist (attached).
- 4) Candidates to send the duly filled up form along with the relevant documents as per the checklist to following address:

MERCANTILE MARINE DEPARTMENT, 1<sup>ST</sup> 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.

- 5) The candidates will be informed by e-mail regarding approval of assessment. E-mail updated on form 29 by the candidate should be active.
- 6) 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. 4000/- (per Part) in Bharatkosh.
- 7) There are 3 papers per Part. The candidate should book for all 3 papers for his first attempt in all 3 Parts.
- 8) 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.
- 9) The original Admit cards will be issued to the candidates on the day of the examination.
- 10) The candidates should report at the Examination Centre, Nav Bhavan Bldg., MMD, Mumbai on the day of examination as per the schedule.
- 11) The candidate should bring original CDC / CoC / Passport for verification on the day of the examination.



#### **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	
Full Name     (Block letters)	
2. Permanent Address	
3. Present Address	
4. Telephone Number (with STD Code)	
<ol><li>Nationality (Proof to be produced)</li></ol>	
6. Passport Number	
7. Date and Place of Issue	
8. Continuous Discharge Certificate (C.D.C) Number	
9. Date and Place of Issue	
10. Date of Birth (Proof to be produced)	·
11.Place of Birth	
12.Personal Identification marks_	
13. INDos No	
14. Email Id	
lote : Any Person who makes, causes t	o be made or assists in making any false representation for the purpose of obtaining for himself /
B. DETAILS OF SCHOLASTIC (Separate sheets must be at	
1.Scholastic Education Level	
2.Principal Subjects	
3. Year of Passing	
4. School/College/ Board	
5. Address of the Institution	

4	05.05	00NO 0751"57	/F65 5-	01/ DZ= :-			1			
1. DETAILS	OF SEA-	GOING SERVICE	(FOR DE	CK DEPAR	RTMENT	PERSONNE	L):			
Name of	Туре	Gross Tonnage	Port of Registry/ Official	Trade: NCV/ FG/ Coastal	Rank	From	То	Per		Re
Ship			Number					Months	Days	
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REPORT O	N STRUC	TURED ON-BOAI	RD TRAIN	ling :	l.					
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Phase No			Nan	ne of Maste			f Certific	ate Of C	Competa	ancy
Phase No	F DESIGN	Date Of	Nan	ne of Maste			f Certific	ate Of C	Competa	ancy
Phase No  REPORT O  Signature	F DESIGN	Date Of	Nan	ne of Maste	ER:	Details O		ate Of C	Competa	ancy
Phase No	F DESIGN	Date Of	Nan	ne of Maste	ER:			ate Of C	Competa	ancy
Phase No  REPORT O  Signature  Name	F DESIGN	Date Of	Nan	ne of Maste	ER:	Details O		ate Of C	Competa	ancy
Phase No  REPORT O  Signature  Name	F DESIGN	Date Of	Nan	ne of Maste	ER:	Details O		ate Of C	Competa	ancy

C. DETAILS OF PRE-SEA TRAINING / MARINE ENGINEERING WORKSHOP:

(Separate sheet must be attached)

1. Training Institute

2. Address of the Institution

#### F. REPORT OF ASSESSMENT CENTRE:

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

Function /Part	Institution	From	To	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.		STCW Code No.			From	То	

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

Number	Certificate	01 (01-	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 M	flarine DepartmentDistric
J. R	EQUEST FOR ALLOTMENT OF SEATS FOR EX	XAMINATION:	.as:
<b>〈</b> 1.	Sight Test :Date of Examination :	Result	Signature of Examiner
₹ 2.	RESULT OF EXAMINATION :( for official purp	ose only) :	
RE	PORT OF EXAMINATION CENTRE		
1.	I hereby certify thathas satisfactory keeping service/approved workshop training as		and proof of sea-going service/watch

The candidate complies with the examination of the Merchant Shipping Standards (Standards of Training Certification and Watch-keeping for Seafarers) Rules, 1998 for the grade of Extra Master of a Foreign Going

Written Examiner

**Function** 

Oral

Oral Examiner

The candidate has passed his examinations for the functions as under:

Written

Phase

Level

**Examiner of Masters and Mates** 

The ca Seafar	indidate complies v ers) Rules, 1998 fo	vith the Merchant Shippin or the grade of Extra Masi	g (Standards of T ter of a Foreign G	Fraining Cer Soing ship	tification and Watch-keeping for
3. The ca	andidate has passe	d the examination of the	functions as unde	er#	
Phase	Level		ction		Sign. of Examiner with Remark
		Written	Oral		
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FINAL AS	SESSMENT PRIOF	R CERTIFICATION		(*	
Medical		R CERTIFICATION		(6)	
Medical Pre-Sea <sup>-</sup>					
Medical Pre-Sea <sup>-</sup> Structure	Fraining				
Medical Pre-Sea <sup>-</sup> Structure Sea-Serv	Гraining d on Board Training				
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Medical Pre-Sea Structure Sea-Serv Written E Oral Asse Modular ( Eligibility Cer	Fraining d on Board Training ice Requirement examination (Assess essment Courses				Mercantile Marine Department

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

NAN	/IE	D03 N0	
SR. NO.	PARTICULARS	ENCLOSED PHOTOCOPY YES/NO/NA	ORIGINAL VERIFIED BY THE PRINCIPAL YES/NO/NA
1	Form 29 - Print out of application		
2	Assessment payment receipt of Bharat Kosh (Rs. 3000/-)		
3	CDC relevant pages copies		
4	Passport relevant pages copies	<b>√</b>	
5	Master F.G. COC (issue by Government of India) copy		
6	Copy of valid Medical Fitness Certificates (Annex IV & V)		
7	Two passport size photographs on white background		

Candidate's Signature:	
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