

For Office	ial Use:						Photo	
Discharge Bo	ook No.:		<u> </u>					
Record No.:			_					
	Al	PPLICATION FOR A	SEAFARER'S REC	CORD AND CE	RTIFICATE	OF DISCHARGE BOOK		
Type or Pri	nt					Please refer to instruc	tions overleaf	
1. Pers	onal Details							
Surname (Family Name):			First Name:			Other Names:		
Date of Birth:			Place of Birth:			Nationality:		
Gender:	Height (M):	Colour of Eyes:	Colour of Hair:		Distinguishir	ng Marks (Scars, tattoos, etc.):		
Passport N	l lumber:	Tax-Payer Registra	Tax-Payer Registration Number (if application)		Telephone Number:			
Address (S	Street/City & Country)):						
Email Addı	ress:							
Jamaican : Issue (if ap	Seaman's Certificate oplicable):	e of Nationality and Identity	, Number and Date of	Number and	expiry date of	previously issued Discharge Book:		
2. Next	of Kin							
Surname:				First Names:				
Relations	ship:	Telephone Nu	umber:	Email Addre	PSS:			
Address:								
3. Emp	loyment Inform	nation						
Name of	Vessel (Current or	r Intended Engagement	: Official Nu	ımber/Flag:		Position Offered:		

Name of Vessel (Current or Intended Engagement):	Official Number/Flag:	Position Offered:
Name and Address of Company or Crewing Agency:		

4. Declaration

I, the undersigned, declare that the information submitted is true and correct and c	opies of supporting documents are genuine to my best knowledge.
Signature of Applicant:	Date (dd/mm/yyyy):



REQUIREMENTS FOR THE ISSUE OF A SEAFARER'S RECORD AND CERTIFICATE OF DISCHARGE BOOK

The Applicant must:

- 1. Complete an Application Form and submit to the Maritime Authority of Jamaica, along with:
 - (a) A valid Passport evidencing nationality
 - (b) Identity & Nationality Booklet (Optional)
 - (c) A valid Police Record Certificate
 - (d) A valid Medical Fitness Certificate
 - (e) An electronic or regular passport sized photograph taken within the last six (6) months
 - (f) A valid Basic Safety Training (BST) Certificate
 - (g) A valid Security Awareness Certificate
 - (h) Relevant fee
 - (i) Letter of Employment or Seafarer's Employment Agreement, or Letter of Discharge stating:
 - i. Applicant's Name.
 - ii. Proposed date and port of Engagement and Discharge.
 - iii. Capacity of Employment (rating, etc.).

REQUIREMENTS FOR THE RE-ISSUE/RENEWAL OF A SEAFARER'S RECORD AND CERTIFICATE OF DISCHARGE BOOK The Applicant must:

- 2. Complete an Application Form and submit to the Maritime Authority of Jamaica, along with:
 - (a) A valid passport evidencing nationality
 - (b) A valid Police Record Certificate
 - (c) A valid Medical Fitness Certificate
 - (d) An electronic or regular passport sized photograph taken within the last six (6) months
 - (e) Completed or expired Discharge Book
 - (f) Relevant fee
 - (g) Declaration of Lost Certificate (if applicable)

N.B. ELECTRONIC DOCUMENTS ARE REQUIRED TO BE NOTARIZED/CERTIFIED.

OFFICIAL USE ONLY								
Student/Cadet	Yacht Crew	Cruise Ship	Officer \square	First Issue		Reissue \square	Replacement	
Receipt Number		Receipt Amount			Date (dd/mm/yyyy)			
Reviewing Officer	Date (dd/mm/yyyy)							
Comments/Remarks								