

APPLICATION FOR A SHIP'S COOK CERTIFICATE OF COMPETENCY

Before completing this form, please ensure you have read the guidance notes MSN 1846 (M)

before completing this form, please ensu	ire you have read the guidance notes MSN 1040 (M)		
1. PERSONAL DETAILS			
Title	Sex		
(Mr/Mrs/Capt etc.)			
Surname	Date of Birth		
Forename(s) in full	Place of Birth		
Nationality			
Return Delivery Address			
Address	Email Address		
	Tel. Number		
Town/City			
Country			
Postcode			
Please note that original documents or attested copies must be sent with this application form.			
2. CHECKLIST			
Two endorsed colour passport size photograph	phs (cropped to 35mm high, 25mm wide)		
STCW Basic Safety Training:			
Proficiency in Personal Survival Techniques (STCW Code Table A-VI/1-2)			
Proficiency in Fire Prevention and Fire Fighting (STCW Code Table A-VI/1-2)			
Elementary First Aid (STCW Code Table A-VI/1-3)			
Personal Safety and Social Responsibility (STCW Code Table A-VI/1-4)			
Proficiency in Security Awareness (STCW Code Table A-VI/6-1)			
Level 2 Food Safety or Food Hygeine course (see guidance note 6)			
Evidence of 1 month sea service (see guidance note 4)			
and STCW Regulation I/9, any seafarer employed or en	our Convention) (Medical Examination) Regulations 2010 (as amended) agaged in any capacity aboard a seagoing vessel must hold a valid ness for the work for which they are employed. Further information		
OR	valent training PLUS Assessment in Marine Cookery		
Level 2 Professional Cookery Diploma in Marine Cookery (see guidance note 5)			

3. DECLARATION

(The maximum penalty for a false declaration is £5000)

I declare that the data contained in this application is, to the best of my knowledge, true and complete. I also declare that the documents are genuine, given and signed by the persons whose names appear on them. I consent to any processing of the data contained in this application by the MCA (including any processing necessary to establish the authenticity and validity of the issued certificate). Please refer to our privacy statement in Section 2 of the guidance notes which explains how we use the personal information we collect from you.

Please sign with your usual signature within the signature box below.

- Please print this form to sign it.
- You must use black ink only.
- You must not extend beyond the boundary of the box.
- The maximum dimensions for your signature are 0.6 cm (h) x 5.0 cm (w).
- Please do not edit the signature box to make it larger.
- You must scan in at a minimum of 200dpi and the signature must be clearly legible.

This signature will be transferred to your certificate. If your signature does not meet the above criteria, we will not be able to issue your certificate.

	For Office use only.
Signature:	
Today's date:	

AN INCOMPLETE APPLICATION WILL DELAY THE ISSUE OF YOUR CERTIFICATE

Completed applications should be sent to the following address:

Registry of Shipping & Seamen Anchor Court Keen Road Cardiff CF24 5JW

Telephone: +44 (0) 203 90 85200

Email: seafarers.registry@mcga.gov.uk

Website: www.dft.gov.uk/mca

The MCA cannot accept any responsibility for documents lost in the post.