

SEALANES MARITIME ACADEMY

(A UNIT OF OHM EDUCATIONAL TRUST)

Reg.No.161

Entrance Test Application Form of Merchant Navy

In office use only

Roll No.-SMA/EXA/14/S

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1. Post Applied For (Choose only one)

SEA MAN

DECK RATING

ENGINE RATING

2. Name of Candidates:

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3. Father's Name:

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4. Date of Birth:

D D

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M M

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Y Y Y Y

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Height

Weight

5. Nationality:

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6. Mailing Address:

DIST:-

STATE:-

PIN CODE:-

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7. Mob. No.:- _____

e-mail address: _____

8. Educational Qualification:

Exam.Passed	Passed Year	Subject	Percentage
10"			
10+2			

Declaration: I hereby declare that above mentioned information are true and correct to the best of my knowledge and belief.

Place: _____

Date: _____

Signature of the Guardian

Signature of Candidate

ADMIT CARD

(FILLED BY THE CANDIDATE)

1.Post Applied for (Choose only one):

SEA MAN

DECK RATING

ENGINE RATING

2.Name of Candidates:

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Father's/ Guardian's Name:

Date of																					Birth
D	D	M	M	Y	Y	Y	Y	Height	Weight												

Signature of Candidate _____ Entrance & Interview, Date & Time: _____

Roll No:-SMA/EXA/:

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Examination Center

Authorized Signature

Note :- In case of any Confusion or problem ,Please contact on:-09838367256, 0551-6506070