

**MARINE FIREMEN'S UNION TRAINING PLAN**

240 2nd Street, San Francisco, CA 94105

(415) 362-4592 x10 • kasia@mfoww.org

**TRAINING APPLICATION**

**Complete all sections and sign at bottom of application. A copy of the member's Merchant Mariner's Credential (all relevant pages) must accompany this application.**

*Courses administered by Training Resources Limited Maritime Institute (TRMLI)*

- STCW Basic Training-Revalidation (1 or 2 days)
- MSC Government Vessels (5 days)
- High Voltage Safety (5 days)
- QMED Fireman/Oiler/Watertender (4 weeks)
- QMED Electrician/Refrigerating Engineer (6 weeks)
- STCW Basic Training-Refresher (3 days)
- MSC Readiness Refresher (2 days)
- STCW RFPEW (5 days)
- STCW Able Seafarer-Engine (5 days)

Course start date: \_\_\_\_\_

Name \_\_\_\_\_ BK/JM# \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street City State Zip Code

Phone \_\_\_\_\_ Email \_\_\_\_\_

Dues paid through \_\_\_\_\_ Last vessel & discharge date \_\_\_\_\_  
Month/Year Vessel, Month/Year

Air transportation required:  Yes  No Closest Airport to your home \_\_\_\_\_

**Review and acknowledge all boxes:**

- I am Fit for Duty and meet the MFOW Welfare Fund eligibility requirements through Covered Employment.
- I understand that acceptance is based on eligibility requirements and the date the application is received by the Training Plan.
- I understand that, once confirmed, cancellation or failure to complete a course without a valid excuse approved by the Training Plan may result in reimbursement to the Plan of airline, hotel, or tuition penalties.
- Lodging is provided by the Training Plan at no cost to the member. If I elect lodging other than that provided by the Training Plan, I will do so at my own expense.
- I hereby certify that all the above statements are true and correct to the best of my knowledge and belief.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_