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. **Failure to provide MMC will result in delayed processing.**

Courses administered by the Maritime Institute in San Diego, unless otherwise noted.

☐ STCW Basic Training-Revalidation (1 day)   ☐ STCW Basic Training-Refresher (3 days)
☐ MSC Government Vessels (4 days)   ☐ MSC Readiness Refresher (2 days)
☐ High Voltage Safety (5 days)   ☐ Basic IGF Code (LNG) (2 days)

☐ QMED Oiler, Boiler Technician/Watertender* (4 weeks) ☐ STCW RFPEW (5 days)
☐ QMED Oiler* (3 weeks, Everett, WA)   ☐ QMED Pump Technician/Machinist (5 weeks)
☐ QMED Electrician/Refrigerating Engineer (6 weeks) ☐ STCW Able Seafarer-Engine (5 days)

Course 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**

Port of Registration: ☐ San Francisco   ☐ Honolulu   ☐ Wilmington   ☐ Seattle (Port Serviced)

*Coast Guard Letter to Test is required and must be submitted with this application.

Review and acknowledge all boxes:

☐ I am Fit for Duty and eligible for medical coverage through covered employment.

☐ I understand that acceptance is based on eligibility requirements and the date the complete 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.

☐ Transportation reimbursement is available upon course completion. See Training and Expense Policy.

☐ I hereby certify that all the above statements are true and correct to the best of my knowledge and belief.

SIGNATURE OF APPLICANT _____**DATE**_____