

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

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

- | | |
|---|---|
| <input type="checkbox"/> STCW Basic Training-Revalidation (1 day) | <input type="checkbox"/> STCW Basic Training-Refresher (3 days) |
| <input type="checkbox"/> MSC Government Vessels (4 days) | <input type="checkbox"/> MSC Readiness Refresher (2 days) |
| <input type="checkbox"/> High Voltage Safety (5 days) | <input type="checkbox"/> Basic IGF Code (LNG) (2 days) |
| <input type="checkbox"/> IECEX CoPC Certification+ (5 days) | |
| <input type="checkbox"/> QMED Oiler, Boiler Technician/Watertender* (4 weeks) | <input type="checkbox"/> STCW RFPEW (5 days) |
| <input type="checkbox"/> QMED Oiler* (3 weeks, Everett, WA) | <input type="checkbox"/> QMED Pump Technician/Machinist (5 weeks) |
| <input type="checkbox"/> QMED Electrician/Refrigerating Engineer (6 weeks) | <input type="checkbox"/> 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.

+ Must hold QMED Electrician Reefer endorsement and have Basic IGF Code on MMC. Two Electrician discharges must accompany the 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 _____