
	<b><u>DIRECTORATE GENERAL OF SHIPPING, GOI,</u></b> <b><u>MUMBAI</u></b>	<b>IS/ISO Clause</b> <b>No.7.1</b>
<b>Ref.:QMS -7.0</b>  <b>Page 1 of 2</b>	<b>Subject:-</b> Format of Training Course Certificates under Chapter V of STCW Convention, as amended in 2010.	<b>File No.</b>  <b>TR/Cir/6( 2)/2016</b>
<b>Approved by</b> <b>the</b>  <b>Director</b> <b>General of</b> <b>Shipping</b>	<b>Training Circular No. 02 of 2016</b>	<b>Date : 28.04.2016</b>

1. The formats of the certificates for the following training courses as per chapter V of the STCW Convention have been revised and are attached herewith.

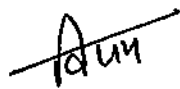
S.No.	Name of course	Course ID
1	Advance Training for Oil Tanker Cargo Operations	80
2	Advance Training for Chemical Tanker Cargo Operations	78
3	Advance Training for Liquefied Gas Tanker Cargo Operations	79
4	Advance Training for Liquefied Natural Gas Tanker Cargo Operations	128
5	Oil Tanker Cargo and Ballast Handling Simulator	86
6	Chemical Tanker Cargo and Ballast Handling Simulator	126
7	Liquefied Gas Tanker Cargo and Ballast Handling Simulator	124
8	Liquefied Natural Gas Tanker Cargo and Ballast Handling Simulator	131
9	Practical Tanker Fire Fighting course for Basic Training Oil, Chemical & Liquefied Gas Tanker Cargo Operations	170

2. All training institutes are required to take note of these formats and implement them for the training course certificates with immediate effect.

*Aduy*

	<b><u>DIRECTORATE GENERAL OF SHIPPING, GOI,</u></b> <b><u>MUMBAI</u></b>	<b>IS/ISO Clause</b> <b>No.7.1</b>
<b>Ref.:QMS -7.0</b> <b>Page 2 of 2</b>	<b>Subject:-</b> Format of Training Course Certificates under Chapter V of STCW Convention, as amended in 2010.	<b>File No.</b> <b>TR/Cir/6(2)/2016</b>
<b>Approved by the</b> <b>Director General</b> <b>of Shipping</b>	<b>Training Circular No. 02 of 2016</b>	<b>Date :</b> <b>28.04.2016</b>

3. This is issued with the approval of Director General of Shipping and Addl. Secretary to the Govt.of India under the power conferred in Chapter IX Rule 75 of the Merchant Shipping (Standard of Training, Certification & Watchkeeping for seafarers) Rules, 2014, notified under Section 78, 87, 88, 98,456,457 and 458 of Merchant Shipping Act, 1958, as amended.

  
 (Vijay Kumar Pandey)  
 Asstt.Director General of Shipping

To  
 All Maritime Training Institutes [through DGS website]

Copy to:

1. The Principal Officers, MMD, Mumbai/Chennai/Kolkata/Kochi/Kandla.
2. The Shipping Master, Mumbai/Kolata/Chennai.
3. INSA/FOSMA/MASSA/ICCSA/MUI
4. Nautical Branch
5. Engineering Branch
6. Management Representative,[QMS], EAC Branch,DGS
7. INDOS Cell, Nau Bhavan, Mumbai 1.
8. Computer Cell.
9. Hindi Cell with a request to provide Hindi Version.
- 10.E-Governance Cell.
- 11.Guard file



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:**                      **Tel:**                      **Fax:**                      **E-mail:**

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**ADVANCED TRAINING FOR  
OIL TANKER CARGO OPERATIONS**

held from ..... to .....

The course is approved by the Directorate General of Shipping and meets the training requirements laid down in Regulation V/1-1 paragraph 4, Section A-V/1-1 paragraph 2 and Table A-V/1-1-2 of the STCW Convention and Code as amended in 2010.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

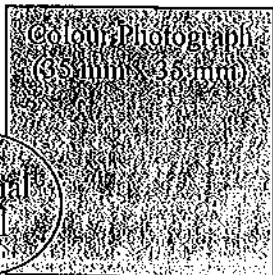
This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

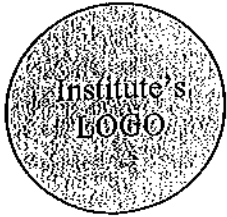
\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_  
Date of Expiry : UNLIMITED

\_\_\_\_\_  
Name and Signature of Dean / Principal



**Note:** This is not a certificate of Proficiency In Advanced Training in Oil Tanker Cargo Operations, This Certificate alongwith other requisite documents must be submitted to the Administration to obtain the Certificate of Proficiency



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:**                      **Tel:**                      **Fax:**                      **E-mail:**

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**ADVANCED TRAINING FOR  
CHEMICAL TANKER CARGO OPERATIONS**

held from .....to .....

The course is approved by the Directorate General of Shipping and meets the training requirements laid down in Regulation V/1-1 paragraph 6, Section A-V/1-1 paragraph 3 and Table A-V/1-1-3 of the STCW Convention and Code as amended in 2010.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

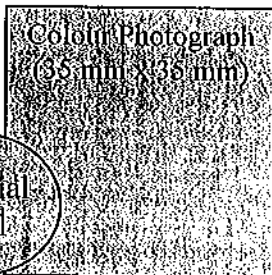
This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_

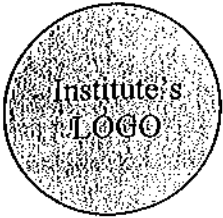
Date of Expiry : UNLIMITED



\_\_\_\_\_  
Name and Signature of Dean / Principal



**Note:** This is not a certificate of Proficiency in Advanced Training in Chemical Tanker Cargo Operations. This Certificate alongwith other requisite documents must be submitted to the Administration to obtain the Certificate of Proficiency.



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:** \_\_\_\_\_ **Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT [full name of candidate]

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**ADVANCED TRAINING FOR LIQUEFIED GAS TANKER CARGO OPERATIONS**

held from .....to .....

The course is approved by the Directorate General of Shipping and meets the training requirements laid down in Regulation V/1-2 paragraph 4, Section A-V/1-2 paragraph 2 and Table A-V/1-2-2 of the STCW Convention and Code as amended in 2010.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

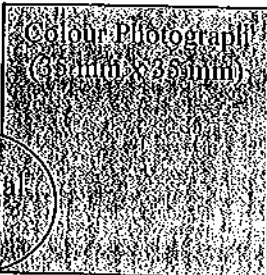
This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

Signature of Candidate

Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_

Date of Expiry : UNLIMITED



Name and Signature of Dean / Principal



**Note:** This is not a certificate of Proficiency in Advanced Training in Liquefied Gas Tanker Cargo Operations. This Certificate alongwith other requisite documents must be submitted to the Administration to obtain the Certificate of Proficiency.



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:                      Tel:                      Fax:                      E-mail:**

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**ADVANCED TRAINING FOR  
LIQUEFIED NATURAL GAS TANKER CARGO OPERATIONS**

held from .....to .....

The course is approved by the Directorate General of Shipping and meets the training requirements laid down in Regulation V/1-2 paragraph 4, Section A-V/1-2 paragraph 2 and Table A-V/1-2-2 of the STCW Convention and Code as amended in 2010, related to Liquefied Natural Gas Tanker Cargo Operations.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

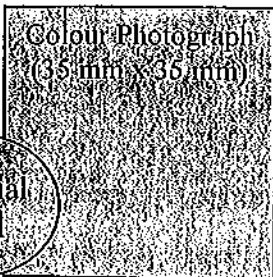
This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_  
Date of Expiry : UNLIMITED

\_\_\_\_\_  
Name and Signature of Dean / Principal



**Note:** This is not a certificate of Proficiency in Advanced Training in Liquefied Natural Gas Tanker Cargo Operations.



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:** \_\_\_\_\_ **Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**OIL TANKER CARGO AND BALLAST HANDLING SIMULATOR**  
*(Conducted on an approved Full Mission Liquid Cargo Handling Simulator for Oil Tanker)*

held from .....to .....

The course is approved by the Directorate General of Shipping and meets the requirements laid down in Regulation I/12, Section A-I/12 and Table A-V/1-1-2 of the STCW Convention and Code as amended in 2010, related to Simulator Training.

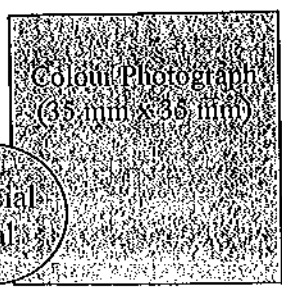
The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

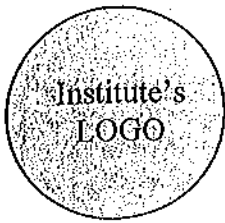
\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_  
Date of Expiry : UNLIMITED



\_\_\_\_\_  
Name and Signature of Dean / Principal

**Note:** This is not a Certificate of Proficiency in Advanced Training in Oil Tanker Cargo Operations This Certificate (for deck officers only) alongwith Advanced Training for Oil Tanker Cargo Operations and other requisite documents must be submitted to the Administration to obtain the Certificate of Proficiency.



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:**                      **Tel:**                      **Fax:**                      **E-mail:**

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in



held from .....to .....

The course is approved by the Directorate General of Shipping and meets the requirements laid down in Regulation I/12, Section A-I/12 and Table A-V/1-1-3 of the STCW Convention and Code as amended in 2010, related to Simulator Training.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

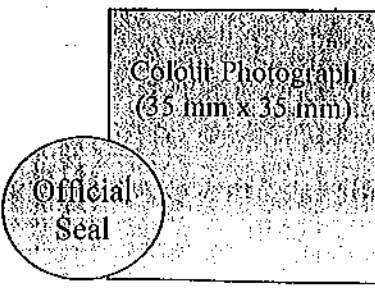
This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_

Date of Expiry : UNLIMITED



\_\_\_\_\_  
Name and Signature of Dean / Principal





**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:** \_\_\_\_\_ **Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**LIQUEFIED GAS TANKER CARGO AND BALLAST HANDLING SIMULATOR**  
*(conducted on an approved full Mission liquid cargo handling simulator for Liquefied Gas Tanker)*

held from .....to .....

The course is approved by the Directorate General of Shipping and meets the requirements laid down in Regulation I/12, Section A-I/12 and Table A-V/1-2-2 of the STCW Convention and Code as amended in 2010, related to Simulator Training.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

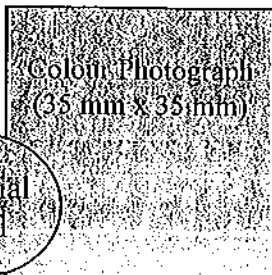
This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_

Date of Expiry : UNLIMITED



\_\_\_\_\_  
Name and Signature of Dean / Principal



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:** \_\_\_\_\_ **Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No. ....

Certificate of Competency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in



held from .....to .....

The course is approved by the Directorate General of Shipping and meets the requirements laid down in Regulation I/12, Section A-I/12 and Table A-V/1-2-2 of the STCW Convention and Code as amended in 2010, related to Simulator Training for Liquefied Natural Gas Tanker Cargo Operations.

The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

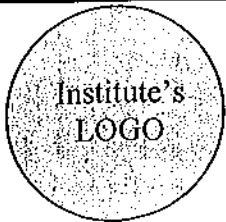
\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_

Date of Expiry : UNLIMITED



\_\_\_\_\_  
Name and Signature of Dean / Principal



**NAME and ADDRESS of the D. G. Approved Training Institute**

**INDOS No:** \_\_\_\_\_ **Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Certificate No:** \_\_\_\_\_

THIS IS TO CERTIFY THAT *[full name of candidate]*

Date of Birth ..... (dd/mm/yyyy)

Holder of C.D.C. No.° .....

Certificate of Proficiency, (if any) Grade : ..... No. ....

Indian National Database of Seafarers (INDoS No.) .....

has successfully completed a training course in

**PRactical TANKER FIRE FIGHTING COURSE  
FOR BASIC TRAINING IN  
OIL, CHEMICAL & LIQUEFIED GAS TANKER CARGO OPERATIONS**

held on .....

The course is approved by the Directorate General of Shipping and meets the training requirements laid down in the competence 'Carry out fire-fighting operations' set out in Tables A-V/1-1-1 and A-V/1-2-1; as part of the training for obtaining the Certificate of Proficiency for Basic Oil and Chemical Tanker Cargo Operations as per Regulation V/1-1, paragraph 2 and Basic Liquefied Gas Tanker Cargo Operations as per Regulation V/1-2, paragraph 2 of the STCW convention and code as amended in 2010.

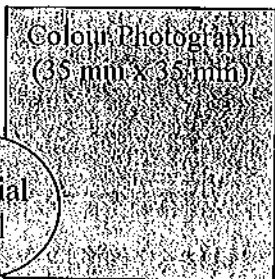
The candidate has also met the additional criteria specified in the STCW Convention, applicable to the issue of the certificate.

This certificate is issued under the authority of the Directorate General of Shipping Ministry of Shipping, Government of India.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Name and Signature of Course In-charge

Date of Issue : \_\_\_\_\_  
Date of Expiry : UNLIMITED



\_\_\_\_\_  
Name and Signature of Dean / Principal



**Note:** This is not a certificate of Proficiency for Basic Training in Oil Tanker Cargo Operations. This Certificate alongwith DGS approved Basic Training in Oil / Chemical / Gas Tanker Cargo Operations Certificate and other requisite documents must be submitted to the Administration or its authorised centre(s) to obtain the Certificate of Proficiency.