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| εθνοσημο**HELLENIC REPUBLIC****HELLENIC COAST GUARD****CENTRAL PORT AUTHORITY OF THESSALONIKI**  | *FORM Α3* |

**DECLARATION OF CREW CERTIFICATION**

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| **Name of ship** | **IMO number** | **Flag:** |
| **Family Name** | **First Name** | **Rank or rating** | **Certificate of Competency** | **Flag State Endorsement** |
| **Number** | **Issue date:** | **Valid until:** | **Issued by1:** | **STCW Ref2** | **Number** | **Issue date:** | **A3** |
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| Date, name and signature by master or authorized officer |

1. Fill in the name of the issuance Authority (Flag State) or authorized training centre.
2. Fill in the capacity of the certificate in accordance with STCW (e.g. II/2, III/2, II/5, etc)
3. In case application for an endorsement has been submitted to the Administration, fill in with “X” and in the field “Issue date” write the date of application submitted