



Republic of the Philippines  
Department of Labor and Employment

## Maritime Training Council

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### Memorandum Circular No. 12 series of 2002

**TO :** ALL ACCREDITED MARITIME TRAINING CENTERS

**SUBJECT :** Submission of Assessor's Information Sheet and Designated Internal Verifier

**DATE :** 26 February 2002

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Further to Memorandum Circular No. 04, series Of 2002 concerning guidelines on the assessment of seafarers' competence, all accredited maritime training centers shall submit the following documents to the MTC Secretariat:

1. List of designated assessors and accomplished information sheet, a copy of which is hereto attached, in accordance with Section 5.7 of the above circular
2. List of designated Internal Verifier in accordance with Section 6 of the above circular

For strict compliance.

  
**RAMON T. TIONLOC, JR.**  
Acting Executive Director

Romelyn/mc assessors info sheet 022002



Republic of the Philippines  
Department of Labor and Employment

# Maritime Training Council

## Assessor's Information Sheet

File No. \_\_\_\_\_

\_\_\_\_\_  
(Training Center)

\_\_\_\_\_  
(Course/s designated as assessor)

<b>Name</b>					
SURNAME		FIRST NAME		MIDDLE INITIAL	
<b>Marine Prof. License/Capacity</b> (if applicable)					
<b>Personal Data</b>					
Date of Birth			Place of Birth		
Postal Address					
Tel./Cell Phone No.			E-mail		
<b>Education</b>					
	School	Date Graduated	Diploma/Degree		
Associate Course					
Degree Course					
Post Graduate					
Others					
<b>Seagoing Service</b>					
Ship	Capacity	Type	GT/ kW	Company	Date of Service

**Other Shore-based Employment/Experiences**  
(Pls. include teaching experiences, if any)

Position	Company/School	Date of Service

**Other Specialized Training**  
(Pls. include training in 6.09 & 3.12)

Course	School	Date

Please indicate below any practical experience in assessing or evaluating the knowledge and skills of seafarers, particular field of knowledge and skills, and the corresponding levels of responsibility. (Ex: Navigation at the operational level, deck watchkeeping at the support level.)


**I certify to the correctness of the above information to the best of my knowledge.**

\_\_\_\_\_  
Name & Signature

\_\_\_\_\_  
Date