

## ABLE SEAMAN – LIFEBOATMAN (PSC)

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SSN: \_\_\_\_\_

REFERENCE #: \_\_\_\_\_

Clerk	General Requirements	Comments/Date	Reference	Eval
	1. CG-719B Application		12.02-9(a)	
	2. Explanation for a YES in Section III <i>(if needed)</i>		12.02-4(c)	
	3. NDR Consent & Check		12.02-4(d)	
	4. Oath <i>(original only)</i>		12.02-15	
	5. Citizenship Or Nationality		12.02-13&14	
	6. Identification & Age 18		12.05-3(a)	
	7. Social Security Card <i>(original only)</i>		MSM 3 1.H.4	
	8. CG-719K Physical Exam <i>(org 1yr; rig 3yr)</i>		12.05-5	
	9. Drug Testing Compliance <i>(within 6 mos)</i>		16.230	
	10. Sea Service Letters or Discharges		12.05-7(a or b)	
	11. Approved Course Certificates <i>(BST for stcw)</i>		12.05-9	
	12. Copy of License, MMD, & STCW		12.02.-27	
	13. Camera Set-Up Form w/Photos <i>(if needed)</i>		12.02-9(b)	
	14. Security Check / Fingerprints / SF-86		12.02-4(c)(1)	
	15. Mariner Fees Entered in MMLD			
	16. Exam Codes Entered in MMLD <i>(if needed)</i>			

### Sea Service Requirements

#### LIFEBOATMAN – (12.10)

- A. **Lifeboatman** – CG approved course and 180 days of service, **OR**
- B. **Lifeboatman-Limited** – Limited exam or limited course and 180 days of service.

#### ABLE SEAMAN – (12.05-7 & MSM 3 16.C.1-10)

- A. **AB-Unlimited** – 1080 days of service on Oceans or Great Lakes.
- B. **AB-Limited** – 540 days of service on vessels over 100 GRT.
- C. **AB-Special** – 360 days of service on any navigable waters of the U.S.
- D. **AB-OSV** – 180 days of service on any navigable waters of the U.S.
- E. **AB-Fishing** – 180 days of service on any navigable waters of the U.S.
- F. **AB-Sail** – 180 days of service on sailing school or equivalent vessels.
- G. **AB-MODU** – 360 days of service on vessels 65ft or over on any navigable waters.

#### BASIC SAFETY TRAINING – STCW (12.05-3(b))

- A. Personal Survival Techniques (A-VI/1-1)
- B. Fire Prevention & Fire-fighting (A-VI/1-2)
- C. Elementary 1<sup>st</sup> Aid (A-VI/1-3)
- D. Personal Safety & Social Responsibilities (A-VI/1-4)

#### RATING FORMING PART of a NAVIGATION WATCH (Policy Letter 14-02)

NOTES: \_\_\_\_\_

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#### MARK IF APPLICABLE:

Restricted Service

Vision Waiver (Local) (HQ)

Physical Waiver (Local) (HQ)

#### O.K. To ISSUE:

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Evaluator's Signature & Date (Approved)

MLD-FM-REC-148 (04)