DEPARTMENT OF HOMELAND SECURITY
U.S. Coast Guard

OMB No. 1625-0040
Exp. Date: 09/30/2028

APPLICATION FOR MERCHANT MARINER CREDENTIAL (FORM CG-719B)

------ Instructions ------

Who must submit this form?

1. Applicants seeking a Merchant Mariner Credential *(MMC)*, whether original, renewal, duplicate, raise of grade, or a new endorsement on a previously issued MMC and applicants requesting a Medical Certificate.
2. Application Assistance: Please call the National Maritime Center (NMC) at 1-888-IASKNMC (1-888-427-5662), or visit their website for more information. www.uscg.mil/nmc.

Section I: Applicant Information

I.1 **Legal Name** - Enter complete legal name. Include any aliases you have used and your maiden or prior name(s).

I.2a **Social Security Number** - If you are applying for an original credential, enter your SSN.

I.2b **Reference Number** - If you have been credentialed by the Coast Guard in the past, enter your reference number.

I.2c **Alien Registration Number** - If you are a legal alien, also enter your alien registration number *(ARN)*.

I.3 **Date of Birth** - If the applicant is under 18 years of age, a notarized statement from legal guardian is required. Attach a notarized statement, signed by a parent or legal guardian, authorizing the Coast Guard to issue a credential.

I.4 **Citizen** - If not a U.S. citizen, please indicate country of nationality.

I.5a-c **Place of Birth** - City, State, Country. If born outside the United States, leave State blank.

Section I: Applicant Address and Contact Information *(If NMC is unable to contact you, it could cause delays in processing your application.)*

I.6a **Home Address** - Principle place of residence. **PO Box is NOT acceptable.**

I.6b **Delivery/Mailing Address** - The address to which you want all correspondence and issued credentials sent. If blank, correspondence and credentials will be sent to the Home Address.

I.6c **Primary Phone Number** - Provide a primary phone number.

I.6d **Alternate Phone Number** - Provide an alternate phone number if available.

I.6e **E-mail Address** - The NMC may attempt to contact you via e-mail. If an e-mail address is provided, you will receive automated e-mail updates regarding the status of your application.

I.6f **Other** - Please provide additional means of communicating with you *(satellite phone, work phone, etc.)* if available.

Section I *(continued)*: Next of Kin/Emergency Contact: *(Check the box for preferred contact method)*

I.7a **Next of Kin/Emergency Contact** - Name & Mailing Address, City, State, Zip Code.

I.7b **Relationship** - Provide relationship status to next of kin listed on application. *(i.e. Mother, Father, Spouse)*

I.7c **Primary Phone Number** - Phone number to contact the person listed in the event of an emergency.

I.7d **Alternate Phone Number** - Provide a cellular phone number, if available.

I.7e **E-mail Address** - Provide an e-mail address for Next of Kin listed.

Section II: Requested Merchant Mariner Credential (MMC) and endorsements *(Including Certificate of Registry)*

General Application Requirements:

An applicant must establish that he or she satisfies all the requirements for the MMC and endorsement(s) sought before the MMC is issued. The Coast Guard may refuse to process an incomplete MMC application.

- A quick reference table for the requirements of an MMC and any endorsement is available online at: 46 CFR 10.239
- More information is available on the National Maritime Center (NMC) website: www.uscg.mil/nmc

MMC and Endorsement Application Descriptions:

All Mariners will receive a single Merchant Mariner Credential. Describe all desired capacities and limitations both national and STCW including tonnage, waters, propulsion mode, horsepower, ratings *(Ordinary Seaman, Able Seaman, QMED-Oiler, etc.)*, purser, doctor, radio operator, continuity, etc.

1. **Original MMC** - An applicant must apply for an original MMC if they have never held any Coast Guard issued credential or if the first credential issued to applicant after their previous credential was revoked pursuant to 46 CFR Part 10. Complete the application and ensure all mandatory documents are contained with application.
2. **Renewal MMC** - A credential may be renewed at any time during its validity and for one year after expiration; you must be qualified to renew all Domestic/ STCW Officer and Rating endorsements to receive an MMC with a new five year expiration date. An MMC renewal-only transaction will automatically be issued with a date that coincides with the expiration date of your previous credential or a date that is 8-months from the time the Coast Guard accepted your application, whichever is sooner. Page 3, Section II of this form provides you the opportunity to decline this post-dating feature and your MMC will be valid immediately.

3. **Duplicate MMC** - In the event of a lost credential, a statement describing the circumstances of the loss must be submitted with the application. The duplicate will have the same authority, wording and expiration date as the lost credential. If a person loses a credential by shipwreck or other casualty that causes damage to a ship, a duplicate will be issued free of charge as per 46 CFR 10.229. If a person loses a credential by other means and applies for a duplicate, the appropriate fee set out in 46 CFR 10.219 must be paid. No application from an alien for a duplicate credential will be accepted unless the alien complies with the requirements of 46 CFR 10.229.
4. **MMC Endorsement(s)** - This is a statement on a mariner's MMC that indicates that he or she is qualified to serve in that capacity. All endorsements including National officer and National rating endorsements as well as all STCW endorsements (International) are listed in **46 CFR 10.109**.

   ***NOTE**: Requests for an endorsement(s) will not change the expiration date of a mariner's MMC unless the applicant also requests a renewal MMC and meets the renewal requirements of all endorsements on the MMC in accordance with 46 CFR 10.227.*

   (a) Raise of Grade (ROG) Endorsement - The requirements for a ROG are found in 46 CFR 10.231. This is an increase in the level of authority and responsibility associated with an existing officer or rating endorsement.

   (b) Increase in Scope - The requirements for an Increase in Scope are found in 46 CFR 10.223. This is a modification or a removal of limitations or scope to existing MMC endorsement(s).
5. **Document of Continuity** - This is a record of qualifications previously held and does not authorize the holder to sail in any capacity listed thereon. Documents of continuity do not expire, do not require medical or security evaluations, and do not require fees. STCW endorsements may not be placed in continuity. No credential expired beyond the 12-month administrative grace period described in 46 CFR 10.227(h) can be converted into a Document of Continuity.
6. **Entry Level Ratings** - There are no professional requirements needed when applying for entry level credential. Ratings may include Ordinary Seaman, Wiper, and/or Stewards Department / Stewards Department *(Food Handler - F.H.)*. Per 46 CFR Part 10, applicants requesting Stewards Department (F.H.) will be required to submit a statement from a physician attesting that the applicant is free from communicable disease.

Section III: Safety and Suitability

III. 1 **Transportation Worker Identification Credential (*TWIC)***:

- A TWIC is required for applicants who need access to secure areas designated in a vessel's security plan and a facility's security plan by the Maritime Transportation Security Act.
- Unless specifically exempted, the Coast Guard must have evidence that you hold a valid TWIC or, for original applicants, that you have applied for a TWIC and are awaiting the results.

III. 2a-f **Criminal Record Review *(Convictions and Drug Use)*:**

In accordance with 46 CFR 10.211, the Coast Guard may review the criminal record of an applicant to determine meet safety and suitability of all applicants before any MMC and any endorsement is issued. At the time of application you must provide a written disclosure of all prior convictions NOT previously disclosed.

- **Original Applicants are required to list ALL convictions.**
- **Written Disclosures** - Applicants may use the optional form (CG-719C) to provide written disclosure of all convictions.
- **Conviction means** that the applicant for a merchant mariner credential has been found guilty, by judgment or plea by a court of record of the United States, the District of Columbia, any State, territory, or possession of the United States, a foreign country, or a military court, of a criminal felony or misdemeanor or of an offense described in section 205 of the National Driver Register Act of 1982, as amended (49 U.S.C. 30304). If an applicant pleads guilty or no contest, is granted deferred adjudication, or is required by the court to attend classes, make contributions of time or money, receive treatment, submit to any manner of probation or supervision, or forgo appeal of a trial court's conviction, then the Coast Guard will consider the applicant to have received a conviction. A later expungement of the conviction will not negate a conviction unless the Coast Guard is satisfied that the expungement is based upon a showing that the court's earlier conviction was in error.

III.3 **National Driver Registry *(NDR)***:

- No MMC will be issued as an original or reissued with a new expiration date, and no new officer endorsement will be issued if the applicant fails the criminal record review in accordance with 46 CFR 10.213.

Section IV: Applicant Consent and Certification

IV.1 **Mariner Outreach System:** This is an optional program used by the Maritime Administration in the event of a national emergency. Applicant will need to select whether Yes, they would like to participate, or No, they do not wish to participate in the Mariner Outreach System, by selecting either of the check boxes.

IV.2 **Continuity:** Credentials issued for continuity purposes are not valid for use.

IV.3 **Consent**: Applicants under the age of 18 must attach a notarized statement of parental/guardian consent.

IV.4 **Certification**: Applicant certifies that the information provided is true and correct. Every person who applies for an original MMC must first take an oath. The applicant must sign and date the application stating they have taken the oath. Failure to sign will result in the application being returned. Per 46 CFR 10.225(c), an oath may by administered by any Coast Guard designated individual or any person legally permitted to administer oaths in the jurisdiction where the person taking the oath resides.

IV.5 **Signature and Date**: Failure to sign and date the application will result in the application being returned.

IV.6 **Third Party Authorization** (*optional)*: If you want the NMC to be able to discuss, release, or receive information/documents regarding your credential application with a third party *(spouse, employer, school, union, etc.)* you must provide specific guidance to the NMC regarding what issues we may discuss and with whom. You may allow release of all information to certain individuals or entities. If you limit the release of certain information you must be specific by making a selection on the application or by attaching additional documentation. For each selection made, ensure the Name of the Organization or Third Party, Organization Point of Contact *(if applicable)*, Address and Phone Number is completed. If you wish to provide multiple Third Party Releases, attach additional pages as needed. A sample may be found on the NMC website: http://www.uscg.mil/nmc/.

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Section I: Applicant Information

1. Legal Name: Last | First Name | Middle Name | Suffix *(Jr., Sr., III)* | Alias(es) or Maiden Name(s) if applicable

2a. SSN *(for Original only)* | 2b. Reference Number *(if applicable)* | 2c. Alien Registration Number *(ARN) (if applicable)* | 3. Date of Birth (MM/DD/YYYY)

4. Citizenship | 5a. Place of Birth *(City)* | 5b. State | 5c.Country | 5d. Color of Eyes | 5e. Color of Hair

Applicant Address and Contact Information *(Please indicate best method(s) of contact by checking the appropriate box(es)).*

6a. Home Address ***(PO Box NOT acceptable)*** ☐

Street Address

City | State | Zip Code

6b. Delivery/Mailing Address, if different ***(PO Box acceptable)*** ☐

Street Address

City | State | Zip Code

6c. Primary Phone Number ☐

6d. E-mail Address ☐

6e. Alternate Phone Number ☐

6f. Other ☐

Next of Kin/Emergency Contact *(Please indicate best method(s) of contact by checking the appropriate box(es).) (Optional)*

☐ 7a. Mailing Address, City, State, Zip Code
Same address as above

Name

Street Address

City | State | Zip Code

7b. Relationship *(Optional)* ☐

7c. Primary Phone Number *(Optional)* ☐

7d. Alternate Phone Number *(Optional)* ☐

7e. E-mail Address *(Optional)* ☐

Section II: Requested Coast Guard Credential(s)

Credential or Endorsement Type(s) Requested:

Endorsement Category	Transaction Type *(Check all that apply: See instructions for definitions and additional requirements for the transaction below)*					
	Original	Renewal	Duplicate	Raise of Grade, New Endorsement or Increase in Scope	Certificate of Registry	Document of Continuity
Officer	☐	☐	☐	☐	☐	☐
Qualified Rating	☐	☐	☐	☐		☐
STCW	☐	☐	☐	☐		
Entry Level	☐	☐	☐			

Description of Endorsement(s) Desired: Include all appropriate information - Officer *(i.e. Deck - Master/Mate/Propulsion/Tonnage/Route OR Engineer Grade - 3rd AE; DDE/Propulsion/Horsepower)* Ratings *(i.e.: Able Seaman, Tankerman, QMED, Lifeboatman)* ***(Please Print)***

☐ FOR RENEWAL TRANSACTIONS ONLY: I request to waive the post-dating feature and to have my merchant mariner credential *(MMC)* issued immediately. I decline having its issuance coincide with the expiration date of my current credential.

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Section III: Safety and Suitability

☐ 1. **TWIC (Transportation Worker's Identification Credential)** EXEMPTION STATEMENT - I have previously applied for a TWIC with TSA and I am exempt from holding a valid TWIC under Coast Guard Policy Letter 11-15. I understand that a name based safety and suitability check could significantly delay the processing of my Merchant Mariner Credential Application.

2. **Criminal Record *(Convictions and Drug Use)***: If you answer Yes to ANY of the questions below you must disclose the information regarding the conviction. You may complete the optional form CG-719C for each question marked "Yes".

a) Have you ever been a user of/or addicted to a dangerous drug, including marijuana, within the last 10 years?	☐ Yes	☐ No
b) Have you ever been convicted of violating a dangerous drug law of the United States, District of Columbia, or any state, or territory of the United States?	☐ Yes	☐ No
c) Have you ever been convicted by any court-including military court - for an offense other than a minor traffic violation?	☐ Yes	☐ No
d) Have you ever been convicted of a traffic infraction arising in a connection with a fatal traffic accident, reckless driving or racing on a highway or operating a motor vehicle while under the influence of, or impaired by, alcohol or a controlled substance?	☐ Yes	☐ No
e) Have you ever had your driver's license revoked or suspended for refusing to submit to an alcohol or drug test?	☐ Yes	☐ No
f) Have you had a drug test with a result other than negative within the last 10-years?	☐ Yes	☐ No

☐ 3. **National Driver Registry *(NDR)*** *Consent (Mandatory for Original, Renewal, or new Officer Endorsement)*: I authorize the National Driver Registry to furnish the U.S. Coast Guard *(USCG)* information pertaining to my driving record. This consent constitutes authorization for a single access to the information contained in the NDR to verify information provided in this application. **NOTE: Not required for Document of Continuity applicants.**

I understand the USCG will make the information received from the NDR available to me for review and written comment prior to disapproving my application or taking any action against my Merchant Mariner's Credential. Authority: 46 U.S.C. 710(g), 46 U.S.C. 7302(c), and 46 U.S.C. 7505.

Section IV: Mariner's Consent/Certification

1. Mariner Outreach System *(Optional)*: I consent to voluntary participation in the Mariner Outreach System to be used by the Maritime Administration *(MARAD)* in the event of a national emergency or sealift crisis. In such an emergency, MARAD would disseminate my contact information to an appropriate maritime employment office to determine my availability for possible employment on a sealift vessel. Once consent is given, it remains effective until revoked either by subsequent application or by sending a signed notice of revocation to the U.S. Coast Guard National Maritime Center, 100 Forbes Dr., Martinsburg, WV 25404. For more information, please visit **https://mos.marad.dot.gov/**.

☐ Yes, I would like to participate ☐ No thanks, I do not wish to participate at this time

2. FOR CONTINUITY RENEWAL ONLY
I understand that a Document of Continuity is not valid for use in accordance with 46 CFR 10.227 and aware of the requirements to obtain an MMC. STCW endorsements may not be placed in continuity per 46 CFR 10.227.

☐ **3. CONSENT**: I am under 18 years of age and a notarized statement of parental/guardian consent is attached.

4. Certification

My signature below attests that:

- All information on this application is true and correct to the best of my knowledge.
- I understand an application determined to be fraudulent may result in the denial of my application for one year from the date of submission, even if the fraudulent information was not by itself cause for denial or prosecution.
- I do solemnly swear or affirm that I will faithfully and honestly, according to my best skill and judgment, and without concealment and reservation, perform all the duties required of me by the laws of the United States. I will faithfully and honestly carry out the lawful orders of my superior officers aboard a vessel.

5. Applicant's Signature

Signature of Applicant
X _____ Date (MM/DD/YYYY) _____

Signature of individual authorized to administer the Oath. This is required only once for a mariner.
X _____ Date (MM/DD/YYYY) _____

Name of individual authorized to administer the Oath: _____

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Section IV: Mariner's Consent/Certification *(continued)*

6. Third Party Authorization *(Optional)*

- I understand that by checking boxes 6a - 6d in Section IV, I authorize release of information, MMC, or authority to act on my behalf to the third party indicated until issuance of a MMC or until Agency final action is made.

☐ 6a. Safety and Suitability

☐ 6b. Professional qualifications, certification records, training records, or Sea Service

☐ 6c. Merchant Mariner Credential Delivery

☐ 6d. Act on my behalf in all matters pertaining to the processing of my current USCG credential application *(All of the above)*

Name of Organization or Third Party

Organization Point of Contact *(if applicable)*

Street Address

City | State | Zip Code

Phone Number | Email Address

Signature of Applicant

X _____

Date (MM/DD/YYYY)

PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. §552a(e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.

AUTHORITY: 14 U.S.C. § 505; 46 U.S.C. § 2103, 7101, 7302, 7502; 46 C.F.R. 10.209.

PURPOSE: To determine whether an applicant meets the regulatory standards for issuance of a U.S. Merchant Mariner Credential (MMC). The U.S. Coast Guard (USCG) evaluates an applicant's qualifications to determine compliance with the national and international requirements for issuance of the MMC, any endorsement within the MMC, and medical certificate.

ROUTINE USES: The information is used by authorized USCG personnel who have a need for the record to determine whether an applicant is a safe and suitable person and qualifies for the MMC, any endorsement within the MMC, and medical certificate. In addition, the USCG uses the information to maintain and update records of merchant mariner document transactions. This information will not be shared outside of DHS except in accordance with the provisions of DHS/USCG-030, Merchant Seamen's Records, 74 Federal Register 30308 (June 25, 2009).

CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION: Furnishing this information (Including your SSN) is voluntary. However, failure to furnish the requested information may result in the non-issuance of the MMC, and any endorsement within the MMC.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The United States Coast Guard estimates that the average burden for this report is 9 minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Chief, Office of Merchant Mariner Credentialing, 2703 Martin Luther King, Jr. Ave, S.E., STOP 7509, Washington, D.C., 20593-7509 or Office Of Management and Budget, Paperwork Reduction Project (1625-0040), Washington, DC 20503.