



IDC STAFF INSTRUCTOR APPLICATION

OFFICE USE ONLY	
# -	_____
Cert. Date	_____
By	_____

REQUIREMENTS:

1. Be renewed and in Teaching status as a PADI Open Water Scuba Instructor or above for the current year.
2. Be certified as a PADI Master Scuba Diver Trainer.
3. Be certified as an Emergency First Response® Instructor.
4. Have successfully completed a sanctioned PADI IDC Staff Instructor Training Course (verified by Course Director signature below).
5. Agree to conduct all levels of diver training consistent with the standards and philosophy outlined in the PADI *Instructor Manual* and use the PADI System and components in their entirety.

PLEASE PRINT CLEARLY Check here if this is a change of address and you want our records changed accordingly.

Name _____ PADI No. _____
First Initial Last

Mailing Address _____

City _____ State/Province _____

Country _____ Zip/Postal Code _____

Home Phone (____) _____ Business Phone (____) _____

FAX (____) _____ Email _____

Date of Birth _____ Sex: M F Certification Date _____
D/M/Y D/M/Y

CERTIFICATION AUTHORIZATION — Application must be signed by the certifying Course Director.

I certify that the above named individual has successfully completed a PADI-sanctioned IDC Staff Instructor Training Course under my direction and is qualified for certification as a PADI IDC Staff Instructor.

_____ Course Director Name (Please Print) _____ Course Director Signature _____

Date IDC Staff Instructor Training Course was completed _____ PADI No. **CD-** _____
D/M/Y

Course Location (City/State/Province/Country) _____

Dive Center/Resort Name _____ Store No. _____

PAYMENT METHOD

See current price list for payment information.

- MasterCard VISA American Express
 Discover Card JCB Maestro (**UK only**)
 Check/Bank Draft No.* _____

*Check/Bank Draft must be payable in the currency of the PADI Office the application is submitted to.

Card Number _____

Card expiration date _____

Cardholder Name _____
Please Print

Authorized Signature _____

CHECKLIST

- Application completed in full
 Signed by Course Director
 One photo attached
 See price list for fee

Please enter the registration number from the card contained in your Course Director Manual to avoid a processing delay.

Registration Number: _____

Date _____

Amount _____

MAIL TO – Your PADI Office.
For mailing information, see current price list or visit padi.com.

Rec'd _____

Entr'd _____

Shp'd _____

Tape / Attach a
4.5 cm x 5.7 cm
1 3/4" x 2 1/4" (approx.)

Head and Shoulder Photo

**PRINT NAME ON
BACK OF PHOTO**

Coin Machine Photos OK
No Dark Glasses