

**PADI®**

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 (____) _____

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☐ 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 _____

☐ **Yes! Sign me up for Automatic Renewal**
USING THE PAYMENT INFORMATION ABOVE

CARD OPTIONS☐ PADI Standard Card (no additional fee)

Support conservation with your Project AWARE Foundation version of the PADI Card:

☐ Project AWARE Foundation Card

(Please indicate the amount of your donation. For a minimum required for processing, please contact your PADI Office.)

Please enter the access code associated with your *Course Director Manual* to avoid a processing delay.

Number: _____

Date _____

Amount _____

MAIL TO – Your PADI Regional Headquarters. 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