Note: This form does not guarantee the processing of your re-

quest for a certification card. A certification card is processed only

We apologize for any inconvenience or delay this situation may

after review and approval of this application.

have caused you.



NEVER RECEIVED CARD FORM

If you have recently completed a scuba course with a PADI Instructor and have not yet received your certification card, please complete the form below. To thoroughly research our records, we need you to complete this application to the best of your ability. Your request will be researched as quickly as possible.

PLEASE TYPE OR PRINT CLEARLY

Return card to: Dive Center/Resort Instructor Diver Certification Number PADI Instructor Number ____ Instructor Store Number S -Dive Center/Resort Level of Certification Attach a Date of Certification 4.5 cm x 5.7 cm / 1³/₄" x 2¹/₄" Diver's Name Head and Shoulder Photo Address Line 1 PRINT NAME ON Address Line 2 **BACK OF PHOTO** City Coin Machine Zip/Postal Code _____ State/Province/Country _____ Photos OK Home Phone (____) _____ Business Phone (____) ___ No Dark Glasses Day/Month/Year Date of Birth Do you recall completing a certification envelope? □ YES Did your Instructor give you the certification envelope to mail to PADI? □ YES Were you issued a signed Temporary card or wall certificate? YES If yes, please submit a copy of the Temporary card or wall certificate with this form. Did you log your training dives in your log book and have the Instructor sign it? ☐ YES If yes, please submit copies of all Instructor-verified training dives. Have you received a Student Evaluation Questionnaire? □ YES If yes, approximately when did you receive it? If you still have the envelope your questionnaire came in, please list the certification number found on the address label: Were all phases of your training completed by the same Instructor? □ YES If no, please list the names of all additional Instructors/Dive Centers/Resorts: Instructor **Dive Center/Resort** Location Classroom/confined water sessions Open water training dives If the Instructor for your classroom and confined water work was different than the Instructor who completed your open water training dives, did you receive a: a. Student Referral form

- □ YES □ NO □ YES □ NO
- b. Signed letter from both Instructors containing the completion dates and level for each phase of your scuba training. If you have such documents, please include copies.
- Note: If the instructor conducting your open water dives is not a member of PADI, it will not be possible for you to receive a PADI certification card at this time. Please contact your local PADI Dive Center/Resort or this office for information and procedure for this situation.

CERTIFICATION LEVEL

Please indicate the level of certification for which you are requesting a replacement card:

□ Skin Diver	Junior Advanced Plus	Specialty
Junior Open Water Diver	Advanced Plus	
Open Water Diver	MEDIC FIRST AID	
Junior Advanced Open Water Diver	☐ Junior Rescue Diver	
Advanced Open Water Diver	Rescue Diver	

DIVER STATEMENT — (must be signed to enable PADI to issue a certification card)

I understand all training requirements for this course and have successfully completed them. I am adequately prepared to dive in the local area under conditions similar to those in which I was trained. I realize that additional training is required for participation in specialty diving activities and in other geographical areas, and recommended after periods of inactivity.

I agree to abide by PADI's Standard Safe Diving Practices.

Diver's Signature _____

PLEASE READ CAREFULLY

Though this section is not required, its completion is highly recommended; this additional information will speed the processing of your certification card. If you are easily able to contact your original Instructor/Dive Center/Resort and they will provide verification of your scuba certification, please have them complete the appropriate section below. Please be sure that all requested information is provided and original certification information is used.

TO BE USED BY ORIGINAL CERTIFYING INSTRUCTOR ONLY				
CERTIFYING INSTRUCTOR'S NAME (Please Print)	INSTRUCTOR NO.	DIVER'S CERTIFICATION LEVEL		
DIVE CENTER/RESORT NAME AND PADI NO.	ORIGINAL CERTIFICATION DATE (Must include day/month/year)	INSTRUCTOR'S SIGNATURE		
TO BE USED BY ORIGINAL DIVE CENTER ONLY				
If the certifying Instructor is no longer with the Dive Center/Resort, either the facility owner, manager or another PADI In- structor (of the original store) may verify the student's certification. The verifying person must attest that the original student records are on file with the Dive Center/Resort, as PADI may request that such records be supplied.				
ORIGINAL CERTIFYING INSTRUCTOR'S NAME	INSTRUCTOR NUMBER			
DIVER'S CERTIFICATION LEVEL	DIVER'S CERTIFICATION DATE (Must include day/month/year.)			
DIVE CENTER/RESORT NAME	VERIFYING INDIVIDUAL'S NAME (Please Print)			
VERIFYING INDIVIDUAL'S TITLE	VERIFYING	VERIFYING INDIVIDUAL'S SIGNATURE		

CHECKLIST

The following materials *must* be returned with this form. PADI will not be able to research your request without these items:

Dehotograph: Clear and unobstructed. Head-and-shoulders, 4/5 cm x 5.7 cm / 13/4"x 21/4," student name printed on back, no dark glasses.

□ \$20 Processing fee. In the event it is not necessary to reprocess your certification card, the processing fee will be returned.

Copies of your PADI Temporary card or wall certificate (if available).

PLEASE ALLOW 5-6 WEEKS FOR RESEARCH