***SDSU Scientific Diving Program***

***Certification Checklist***

**Diver Name: Date:\_\_\_\_\_\_\_\_\_\_\_\_**

**Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_Diving certification

Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_

Level: \_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #Dives Prior to Class:\_\_\_\_\_\_\_\_

\_\_\_\_\_Current dive physical

Date of exam:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of expiration:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_CPR Certification

Certifying Agency:\_\_\_\_\_\_\_\_\_\_\_\_

Date of issue:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of expiration:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_First Aid Certification

Certifying Agency:\_\_\_\_\_\_\_\_\_\_\_\_

Date of issue:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of expiration:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Emergency Oxygen Administration

Certifying Agency:\_\_\_\_\_\_\_\_\_\_\_\_

Date of issue:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of expiration:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Diving Experience Summary Form

\_\_\_\_\_Diving Equipment List

\_\_\_\_ Received current copy of SDSU’s Dive Manual

\_\_\_\_\_Signed SDSU’s Diving Safety Statement of Understanding

\_\_\_\_\_Annual Equipment Service

Date:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Written Exam Passed

Date:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Open Water Check out Dive Passed

Date:\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_**Approved Depth: \_\_\_30’ \_\_\_60’ \_\_\_100’\_\_\_130’\_\_\_150’**

***SKILLS EVALUATION***

***Swim Skills-confined water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_ Surface swim 400 m. in 12 minutes without swim aids

\_\_10 minute tread water, or 2 minute tread without use of hands

\_\_Underwater swim of 25m without surfacing

\_\_Underwater swim of 50m without surfacing (fins optional)

\_\_Surface dive to 12 ft, retrieve an eight pound weight

\_\_Diver surface tow 25m

\_\_Demonstrate requested snorkeling skills

***Confined Water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Proper entry and descent

\_\_Mask clear

\_\_Mask removal

\_\_Regulator removal and replacement

\_\_Buddy breathing

\_\_Alternate air source use

\_\_Underwater 25m. swim buddy breathing without face mask

\_\_Underwater 25m. swim using alternate air source without face mask

\_\_Underwater weight belt removal and replacement

\_\_Underwater BC removal and replacement

\_\_Surface 25m. tow simulating rescue breathing.

***Open Water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Equipment familiarity

\_\_Site assessment

\_\_Buddy check

\_\_Proper entry and descent

\_\_Regulator ditch and recovery

\_\_Mask removal and replacement

\_\_Buddy breathing

\_\_Alternate air source use

\_\_Gauge awareness

\_\_Kelp swim/crawl

\_\_Proper buoyancy control

\_\_Proper hand signal use

\_\_Proper buddy contact

\_\_Simulated Emergency Swimming Ascent

\_\_Execute proper safety stops at 15’

\_\_400m. surface swim on full scuba

\_\_Successfully plan another no decompression repetitive dives

\_\_Dive log submittal

***Rescue-open water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Cramp removal

\_\_Water exits to beach and boat with rescued diver

\_\_Tired diver assists

\_\_Full scuba rescue to beach/platform with rescue breaths

***Data Collection-open water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Transects

\_\_Quadrants

\_\_Swaths

\_\_Point contact

\_\_Kelp community animal/plant identification

***Navigation-open water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Compass navigation

\_\_Surface triangulation

\_\_Site location and relocation

***Search and Recovery-open water Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Circular transects

\_\_Swath transects

\_\_Proper use of lift bags

***Specialized Gear Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Full face mask

\_\_Surface-supplied

\_\_Scooters

\_\_Nitrox

***Small Boat Handling Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_Practical experience

***Additional Skills:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Date of Hyperbaric Chamber Visit:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Overall Performance: \_\_Pass \_\_ Remediation Required**

***Completed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  Mike Anghera

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Comments