



TEC SIDEMOUNT INSTRUCTOR APPLICATION

Applicant Name _____ PADI Number _____

Mailing Address _____

City _____ Province/State _____ Postal/Zip Code _____

Country _____ Email _____

Home Phone _____ Business Phone _____

FAX _____ Sex M F Birthdate _____

D/M/Y

REQUIREMENTS FOR APPLICANTS COMPLETING INSTRUCTOR TRAINING COURSE

- ___ 1. PADI Tec Instructor (or TecRec Instructor with a higher rating)
- ___ 2. Be a PADI Tec Sidemount Diver (or have a qualifying certification from another training organization)
- ___ 3. I have logged at least 20 technical sidemount dives including 10 with 3 or more cylinders (two mains and at least 1 stage/deco cylinder)
- ___ 4. Have successfully complete the Tec Sidemount Instructor Training course.

TEC SIDEMOUNT INSTRUCTOR

Successfully completed a Tec Sidemount Instructor Training Course (to be completed by PADI Tec Sidemount Instructor Trainer only)

Course Location _____ Date (D/M/Y) _____

Instructor Trainer Name _____ PADI Number _____

Instructor Trainer Signature _____

PADI Dive Center/Resort Name _____ PADI Number _____

REQUIREMENTS IF MAKING DIRECT APPLICATION

- 1. PADI Tec Instructor (or TecRec Instructor with a higher rating).
- 2. Tec 50 Diver (or have a qualifying certification from another training organization)
- 3. Have logged at least 50 technical sidemount dives including 30 with 3 or more cylinders (two mains and at least one stage/deco cylinder)
- 4. PADI Tec Sidemount Diver (or have a qualifying certification from another training organization)

Applicant Signature _____ Date _____

D/M/Y

Note: Your application may need to include documentation/proof of meeting these requirements by including photocopies of instructor certification cards and other relevant course certifications and qualifications. Log entry copies or print outs must specify dates, depths, locations, times and gases used. Verification and signatures provided by witnesses (divers and instructors of courses assisted) must provide the same information.

INSTRUCTOR APPLICANT ACKNOWLEDGEMENT

I certify that the information on this application is true and correct to the best of my knowledge and understanding, and that this application is subject to approval by PADI.

Applicant Signature _____ Date _____
D/M/Y

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 _____

MAIL TO – Your PADI Office

Attn. **PADI Tec Sidemount Instructor Certification**

For mailing information, see current price list or visit padi.com.

Rec'd _____ Entr'd _____ Shp'd _____

CHECKLIST

- Application completed in full
- Requirements completed
- Copies of qualifying certification, if required
- Applicant and verifying instructor signatures
- One photo attached
- See price list for fee

PLEASE DO NOT WRITE IN THIS SPACE
Date _____
Amount _____

<p>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</p>
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