

# PADI Open Water Diver Course Record and Referral Form

Student Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
Day/Month/Year  
 Mailing address \_\_\_\_\_ Sex  M  F  
 City \_\_\_\_\_ State/Province \_\_\_\_\_  
 Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_  
 Phone Home (\_\_\_\_) \_\_\_\_\_ Business (\_\_\_\_) \_\_\_\_\_  
 Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

All PADI Instructors who initial this document must complete an identification section below.

PADI Instructor \_\_\_\_\_ Signature \_\_\_\_\_  
 PADI No. \_\_\_\_\_ Dive Center/Resort No. \_\_\_\_\_ Date \_\_\_\_\_  
Day/Month/Year  
 Phone Home (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
 Email \_\_\_\_\_

PADI Instructor \_\_\_\_\_ Signature \_\_\_\_\_  
 PADI No. \_\_\_\_\_ Dive Center/Resort No. \_\_\_\_\_ Date \_\_\_\_\_  
Day/Month/Year  
 Phone Home (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
 Email \_\_\_\_\_

**Note: Attach additional sheet for other PADI Instructor information if necessary.**

## When referring a PADI Scuba Diver/Open Water Diver student:

- Fill in the diver and PADI Instructor information and note appropriate areas of training completed.
- Attach a copy of the diver's PADI Medical Statement to this form.
- Advise the diver of the need for a photo for certification card processing.
- Encourage the diver to complete training as soon as possible and explain that this form is only valid for one year from the last training section completion date.

## A. Confined Water Dives

Date Completed Day / Month / Year	Instructor** Initials PADI #	Date Completed Day / Month / Year	Instructor** Initials PADI#
CW 1* ____ / ____ / ____	_____ # _____	CW 4 ____ / ____ / ____	_____ # _____
CW 2 ____ / ____ / ____	_____ # _____	CW5 ____ / ____ / ____	_____ # _____
CW 3 ____ / ____ / ____	_____ # _____		

\*DSD with all CW Dive 1 skills = Open Water Diver CW Dive 1

## Waterskills Assessment

Date Completed Day / Month / Year	Instructor** Initials PADI #
200 metre/yard Swim OR 300 metre/yard Mask/Snorkel/Fin Swim ____ / ____ / ____	_____ # _____
10 Minute Survival Float* ____ / ____ / ____	_____ # _____

## Dive Flexible Skills

Equipment Preparation and Care* ____ / ____ / ____	_____ # _____
Disconnect Low Pressure Inflator Hose* ____ / ____ / ____	_____ # _____
Loose Cylinder Band ____ / ____ / ____	_____ # _____
Weight System Removal and Replacement (surface)* ____ / ____ / ____	_____ # _____
Emergency Weight Drop (or in OW)* ____ / ____ / ____	_____ # _____

## Skin Diving Skills

____ / ____ / ____	_____ # _____
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## Dry Suit Orientation

____ / ____ / ____	_____ # _____
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(Note: If all Confined Water Dives and Waterskills Assessment have been completed by one instructor, only one signature required.)

**All Confined Water Dives listed above and the Waterskills Assessment have been completed.**

Instructor Signature \_\_\_\_\_  
 PADI # \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**\*\*I certify that this student has satisfactorily completed this skill/section/dive as outlined in the PADI Instructor Manual. I am a PADI Instructor renewed in Teaching status for the current year.**

## B. Knowledge Development

Course option:  RDP Table  eRDP<sub>M</sub>L  Computer only

	Date Completed Day / Month / Year	Completed KR	Passed Quiz/Exam	Viewed Open Water Video	Instructor** Initials PADI #
Sec 1	____ / ____ / ____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ # _____
Sec 2	____ / ____ / ____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ # _____
Sec 3	____ / ____ / ____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ # _____
Sec 4	____ / ____ / ____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ # _____
Sec 5	____ / ____ / ____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ # _____
OR eLearning Quick Review	____ / ____ / ____		_____		_____ # _____

**(Note: If all above Knowledge Development sessions have been completed by one instructor, only one signature required)**

**All Knowledge Development sessions listed above have been completed, Quizzes/Exams passed.**

Instructor Signature \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## C. Open Water Dives

Date Completed Day / Month / Year	Instructor** Initials PADI #	Date Completed Day / Month / Year	Instructor** Initials PADI #
Dive 1 ____ / ____ / ____	_____ # _____	Dive 3 ____ / ____ / ____	_____ # _____
Dive 2 ____ / ____ / ____	_____ # _____	Dive 4 ____ / ____ / ____	_____ # _____

## Dive Flexible Skills

These skills may be completed during any Open Water Training Dive.

	Completed on	Instructor** Initials PADI#
1. Cramp Removal*	Dive # _____	_____ # _____
2. Snorkel/Regulator Exchange*	Dive # _____	_____ # _____
3. Inflatable Signal Tube/DSMB Deployment*	Dive # _____	_____ # _____
4. Emergency Weight Drop (or in CW)*	Dive # _____	_____ # _____
5. Surface Swim with Compass	Dive # _____	_____ # _____
6. Tired Diver Tow	Dive # _____	_____ # _____
7. Remove/Replace Scuba (surface)	Dive # _____	_____ # _____
8. Remove/Replace Weights (surface)	Dive # _____	_____ # _____
9. CESA (Dive 2, 3 or 4)	Dive # _____	_____ # _____
10. UW Compass Navigation (Dive 2, 3 or 4)	Dive # _____	_____ # _____

**(Note: If all above Dive Flexible Skills have been completed by one instructor, only one signature is required)**

**All Dive Flexible Skills listed above have been completed.**

Instructor Signature \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Student Statement: I understand the training requirements for this course and have successfully completed all certification requirements. I am adequately prepared to dive in areas and under conditions similar to those in which I was trained. I realize that additional training is recommended for participation in specialty diving activities, in other geographical areas, and after periods of inactivity that exceed six months. I agree to abide by PADI's Standard Safe Diving Practices.**

Student Signature \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**All requirements for certification as a PADI Scuba Diver have been met (completion of Knowledge Development sessions 1, 2, 3 Confined Water Dives 1, 2, 3 Open Water Dives 1, 2 and all dive flexible skills marked with an asterisk \*).**

Instructor Signature \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**All requirements for certification as a PADI Open Water Diver have been met.**

Instructor Signature \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Important Points for the Diver and Instructor

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### To the Diver

1. Make advance logistical and financial arrangements with a PADI Dive Center, PADI Resort or PADI Instructor to complete your training. Verify that the PADI Instructor(s) who will complete your training is in Teaching status.
2. Take this form, along with a copy of your completed PADI Medical Statement and a photograph to the PADI Dive Center, PADI Resort or PADI Instructor completing your training.
3. This referral form is valid for one year after the last training module completion date, however you should complete your training as soon as possible.
4. Retain this form until you have completed all required training sessions.
5. The PADI Instructor(s) continuing your training will preassess your skills and knowledge and review anything that may be unclear.
6. Upon completion of all required open water dives, you and the PADI Instructor will complete a Positive Identification Card (PIC) envelope. This envelope must be submitted to PADI along with your photo to obtain a certification card.

**NOTE:** After certification, you'll want to continue your diving adventures. Visit your initial PADI Dive Center, PADI Resort or PADI Instructor and ask about participating in a Discover Local Diving experience or another PADI Course.

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### To the Referring PADI Instructor(s)

1. Fill in the requested information on this form, including the diver's name and address and your contact information. Also, fill in the appropriate areas of training completed before referring the diver.
2. Attach a copy of the diver's PADI Medical Statement to this form. Also advise the diver of the need for a photo for certification card processing.
3. Give the diver the entire form. If possible, assist the diver in making arrangements with a PADI Dive Center, PADI Resort or PADI Instructor for completing training as additional local requirements may apply. Keep a photocopy for your records.
4. Encourage the diver to complete the training as soon as possible. Advise the diver that the form is only valid for one year after the last training module completion date.

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### To the Receiving PADI Instructor(s)

1. Preassess the diver's knowledge and skills. Be certain that the diver is adequately prepared to continue training.
  2. A diver may be referred between any academic module, confined water dive or between Open Water Dives 1-4.
  3. Upon completion of each component, initial and date this form in the appropriate area. The diver retains the referral form until the completion of all certification requirements. Retain a photocopy of this form for your records.
  4. If you conduct Open Water Dive 4, you are the certifying instructor. Complete and submit a PADI Positive Identification Card (PIC) envelope/Online to PADI for processing. Retain a copy of the completed referral form for your records and forward a copy to the original instructor for his records.
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**QUESTIONS – About how to use the form? Call PADI.**

## The Scuba Diver Statement

The PADI Scuba Diver rating allows you to gain experience under direct professional supervision. This agreement defines the limitations of your pre-entry level certification and describes the diving practices necessary for your comfort and safety.

I, \_\_\_\_\_, understand that as a PADI Scuba Diver, I should:

1. Dive under the direct inwater supervision of a PADI Divemaster, Assistant Instructor or Instructor. Listen carefully to dive briefings and respect the advice of those supervising my dive activities. Adhere to the buddy system on every dive.
2. Dive in conditions better than or similar to those in which I was trained. This includes limiting maximum dive depth to 12 metres/40 feet, or receiving additional instruction before diving deeper.
3. Maintain a reasonable fitness level for diving and dive within personal limitations. Avoid overexertion while diving and not dive under the influence of alcohol or drugs.
4. Obtain air fills and dive equipment only from a reputable source, such as a PADI Dive Center or Resort, to avoid contaminated air. Check that the cylinder used is not marked for enriched air (nitrox).
5. Maintain proper buoyancy while diving. Adjust weight for neutral buoyancy at the surface with no air in the BCD and take into account buoyancy changes due to air use during the dive. Establish positive buoyancy by ditching the weight belt and/or inflating the BCD when in distress on the surface.
6. Continue dive education to ensure appropriate training and experience before exceeding the limits of the PADI Scuba Diver rating. Review skills under supervision in a controlled environment after periods of diving inactivity.
7. Breathe properly for diving. Never breath hold or skip breathe when using compressed air.
8. Ascend at a rate of 18 metres/60 feet per minute or slower from every dive and make a safety stop at the end of every dive.
9. Use complete, properly fitting, well-maintained and familiar scuba equipment. Consult a dive professional for advice about and orientation to any unfamiliar equipment.
10. Know and obey local laws and regulations relevant to recreational diving.
11. Understand that I may upgrade to Open Water Diver in order to dive without professional supervision anytime after my Scuba Diver certification date.
12. Understand that deviating from safe diving practices will increase the risk of decompression illness, other injury or death and recognize that for safety and well being PADI Scuba Divers should abide by these recommendations and seek additional information or advice before diving in unfamiliar situations.