



Specialty Instructor Upgrade Form For Assistant Instructors and Instructors

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Method of Payment

AMEX , MasterCard , Visa , Check or Money Order Make Checks Payable to International Training

Exp. Date:

Signature:

Certificates & cards are sent directly to the instructor or facility.

Certification Fee: * Refer to current price list

Please Check Only One Course Per Form

- | | | |
|--|--|---|
| <input type="checkbox"/> Advanced Buoyancy Control | <input type="checkbox"/> Equipment Specialist | <input type="checkbox"/> Underwater Video |
| <input type="checkbox"/> Altitude | <input type="checkbox"/> Ice | <input type="checkbox"/> VIP |
| <input type="checkbox"/> Boat | <input type="checkbox"/> Marine Ecosystems Awareness | <input type="checkbox"/> Wreck |
| <input type="checkbox"/> Computer Diver | <input type="checkbox"/> Night /Limited Visibility | <input type="checkbox"/> Other: (Specify) |
| <input type="checkbox"/> Computer Nitrox Diver | <input type="checkbox"/> Research | |
| <input type="checkbox"/> CPROX Administrator | <input type="checkbox"/> Search & Recovery | |
| <input type="checkbox"/> CPR1st Administrator | <input type="checkbox"/> Shore/Beach | |
| <input type="checkbox"/> CPROX1stAED Administrator | <input type="checkbox"/> Sidemount | |
| <input type="checkbox"/> Deep Diving (130 ft Max) | <input type="checkbox"/> Solo | |
| <input type="checkbox"/> Diver Propulsion Vehicle | <input type="checkbox"/> U/W Hunter & Collector | |
| <input type="checkbox"/> Drift Diver | <input type="checkbox"/> U/W Navigation | |
| <input type="checkbox"/> Dry Suit | <input type="checkbox"/> U/W Photography | |

Current Instructor Number:

Print name as it is to appear on
certification card

Complete mailing address
(including City, State and Postal code)

Phone number

E-mail address

**Please fill out the appropriate section on Page 2
BEFORE submitting the form to SDI**

Specialty Procedure #1 (Assistant Instructors must use this process)

Participation in an Instructor Specialty Class:

A SDI Instructor has completed an SDI Specialty Instructor Course.

Instructor Requirements:

- A. I agree to adhere to the SDI Specialty Course standard and outline provided by SDI Headquarters.
- B. Documentation of 10 dives in that particular specialty course.

Course Location: _____ **Course Completion Date:** ___/___/___

Instructor Trainer Signature: _____ **SDI #** _____ **Date:** ___/___/___

AI or Instructor Signature: _____ **Date:** ___/___/___

Specialty Procedure # 2

Administrative Specialty Instructor Upgrade:

An instructor who wishes to crossover a specialty instructor rating from another certification agency to SDI.

OR

An instructor who feels his experience in a particular specialty meets the requirements to teach a SDI Specialty Course. **Must complete the dive history section below**

Instructor Requirements:

- A. I agree to adhere to the SDI Specialty Course standard and outline provided by SDI Headquarters.
- B. Documentation of 25 dives in that particular specialty course.

Instructor Signature: _____ **Date:** ___/___/___

Specialty Procedure #3

Request for a Specialty Instructor Upgrade:

An instructor, who has a specialty rating that is not listed as one of the SDI Specialty Courses, can apply for specialty course recognition.

Instructor Requirements:

- A. I agree to provide SDI Headquarters with the specialty course outline
- B. Complete documentation of dive history plus documentation of 25 dives in that particular specialty course.

Instructor Signature: _____ **Date:** ___/___/___

Dive History:
