



Coastal and Marine Laboratory
Academic Diving Program



Application for Scientific Diving Status

NAME: _____ DATE: _____

Anyone wishing to obtain Scientific Diver status under the auspices of FSU must have the appropriate prerequisites and qualifications. Divers may be evaluated for their fitness and ability to dive. This evaluation will be conducted by arrangement with the University Diving Officer or his designee. Scientific divers completing this process meet the requirements of AAUS and the [FSU Standards for Scientific Diving](#). The evaluation may include the following:

	Date/ By
Review of Diving Credentials:	
a) Diving Questionnaire completed.	_____
b) Waiver forms completed	_____
c) Certifications copied	_____
Written Exam:	
a.) Grade _____% (minimum passing score 80%) b.) Corrected and discussed with candidate	_____
Medical Evaluation:	
a.) Forms discussed with candidate	_____
b.) Medical approval received	_____
c.) Any physical limitations discussed with candidate NONE	_____
Confined Water Skills Evaluation: (Scheduled <u>AFTER</u> passing written exam, and receiving medical clearance)	
a.) <u>Swimming Skills Evaluation</u> (Without the use of swim aids)	
1. Swim underwater for 75 feet on one breath without surfacing or using swim aids	_____
2. Swim 400 yards using at least 2 strokes in 12 minutes or less	_____
3. Tread water for 10 minutes (last 2 minutes with no hands)	_____
4. Transport a person of equal size 75 ft. at the surface without using swim aids.	_____
b.) <u>Skin Diving Skills Evaluation</u>	
1. Using only mask, snorkel & fins, surface dive to 10 ft., recover a 6 lb. weight, return to surface, and clear snorkel using only one breath.	_____
c.) <u>SCUBA Skills Evaluation (Skills Performed at the Surface)</u>	
1. Perform water entry wearing full SCUBA equipment.	_____
2. Establish positive and neutral buoyancy	_____
3. Alternate between snorkel and SCUBA while kicking	_____
4. Swim 400 yards wearing full SCUBA breathing only through snorkel.	_____
5. Recover and surface an unconscious, non-breathing diver, and perform rescue breathing while towing to exit point.	_____
6. Perform ladder exit wearing full SCUBA	_____
d.) <u>SCUBA Skills Evaluation (Skills Performed While Submerged)</u>	
1. Establish neutral buoyancy	_____
2. Remove, replace and clear face mask of water.	_____
3. Remove, relocate and clear regulator	_____
4. Buddy breathe as both the donor and recipient, with and without face mask.	_____
5. Remove and replace all equipment underwater	_____
6. Simulate a swimming free ascent (CESA)	_____
7. Properly use underwater signs and signals for: OK, up, down, low on air, out of air, buddy breathe, help, look and any other requested by evaluator.	_____
Open-Water Skills Evaluation: (As described in FSU Standards, Section 4.23)	

I have performed each of the skills listed above. I have been advised of any deficiencies and encouraged to seek additional training in identified areas of weakness.

CANDIDATE SIGN _____ DATE _____

The above listed person has satisfactorily demonstrated proficiency in each of the above skill areas.

Watermanship: POOR GOOD EXCELLENT
Judgment POOR GOOD EXCELLENT

EVALUATOR (Print) _____ (Sign) _____ DATE _____

Scientific Diver's Introduction to the ADP System

DATE/BY

(To be completed by University Diving Officer or designee)

- a.) FSU regulations and administration reviewed.
- b.) Dive log system reviewed
- c.) Equipment checkout procedure reviewed.
- d.) The Diving Seminar reviewed
- e.) Special restrictions and waivers reviewed
- f.) AAUS 100 hour training standard reviewed
- g.) Depth certification restrictions reviewed
- h.) Risk management training
- i.) Compressed-gas cylinder hazmat training
- j.) BLS CPR for the Healthcare Professional
- k.) Diving First Aid
- l.) Oxygen Administration

If the evaluator or the Diving Officer find the candidate lacking in any particular area, he/she will be advised to get additional training either through the Academic Diving Program or elsewhere prior to certification. **If the candidate passes the evaluation, that person will be granted a DIVER-IN-TRAINING status, and will be allowed to dive no deeper than 30 feet and under the immediate direction and presence of an ACTIVE diver for no more than 12 months.**

I have discussed, understand, and agree to follow the AAUS Standards for Scientific Diving, the FSU/ADP's Standard Operating Procedures, and the associated administrative forms with the University's Diving Officer or his designee.

CANDIDATE SIGN _____ **DATE** _____

The person named on this document is granted status as a Scientific **DIVER IN TRAINING**

UNIVERSITY DIVING OFFICER _____ **DATE** _____

“ACTIVE” Science Diver status is available to “Divers in Training” status divers who complete 12 dives with an Active Scientific Diver and complete 100 hours of training beyond basic SCUBA certification. Criteria for such training is located in the FSU Standards for Scientific Diving. Training should be recorded on the Scientific Diver Training Record that follows.

Data entered into ADP Diving Information System.by (print name) _____ **Date** _____