



ADVENTURES IN DIVING DOCUMENTATION WORKSHEET

(For PADI Instructor Use Only)

PLEASE PRINT CLEARLY

Diver Name _____

Diver Mailing Address _____

City _____ State/Province _____

Country _____ Zip/Postal Code _____

Phone (____) _____ Business Phone (____) _____

email _____ Fax (____) _____ Birth Date _____ Sex M F
Day/Month/Year

Notes to the PADI Instructor

- This documentation worksheet is for instructor use only; retain it for your files. The worksheet should not be forwarded to PADI for Adventures in Diving certification processing.
- Use this worksheet to keep a record of a student diver's completion of course requirements.
- Refer to the "Adventures in Diving Program Instructor Guide" in your PADI Instructor Manual for general course standards and a complete listing of certification requirements.

Altitude Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

AWARE - Fish Identification Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

Boat Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

Deep Dive (required for Advanced Open Water Diver certification)

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

Digital Underwater Photography Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

Diver Propulsion Vehicle (DPV) Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

Drift Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____

Diver Signature** _____ Date _____

Dry Suit Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Enriched Air Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Multilevel and Computer Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

National Geographic Dive (conducted through PADI National Geographic Dive Center)

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Night Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Peak Performance Buoyancy Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Search and Recovery Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Underwater Naturalist Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Underwater Navigation Dive (required for Advanced Open Water Diver certification)

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Underwater Photography Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Underwater Videography Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

Wreck Dive

Knowledge Review Completion Dive Completion Date _____ Instructor Name* _____
Diver Signature** _____ Date _____

* Instructor name and PADI number verifying completion of requirements. Verification derived from Adventure Dive Training Records found in PADI Log Books.

** "I verify that I have completed all of the Performance Requirements for this Adventure Dive. I realize that there is more to learn about this type of diving and that completion of a PADI Specialty Diver course in this area is highly recommended."