

NOAA Diving Program

Scientific Diver Certification Checklist for UDSs

Name of Applicant _____

Line Office and Unit _____

Phone No. and e-mail _____

1. Verify eligibility

- a. ___ Scuba certification. Collect copy of C-card
- b. ___ Experience. Proof of minimum 25 dives. Collect dive log info

2. Provide medical forms to diver, schedule tests

- a. ___ NF56-57 Medical Evaluation Checklist (indicate Initial - Scientific)
- b. ___ DD2087 Report of Medical History
- c. ___ DD2808 Report of Medical Examination
- d. ___ Instruct diver to send form directly to XO NDC
- e. ___ Monitor status of medical application

3. Collect other documents

- a. ___ NDP Dive Activity Resume
- b. ___ Current CPR, First Aid, O2 administration (refresh these if needed)
 - i. Expiration date of CPR training _____
 - ii. Expiration date of First Aid training _____
 - iii. Expiration Date of O2 administration _____

4. After medical has been approved by NDC DMO

- a. ___ Conduct swim test
- b. ___ Conduct physical fitness test
- c. ___ Administer written exam. Applicant must score 80% on all three sections
- d. ___ File results in local diver file

5. Send this checklist to NDC XO.

I have conducted the Scientific Diver Application procedures. I request that this diver be certified as a NOAA Scientific Diver.

UDS Name (Print) _____

UDS Signature _____ Date _____