



# Smithsonian Institution

## Scientific Diver Application

Name (Last, First, MI): \_\_\_\_\_ Social Security #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Contact: E-mail: \_\_\_\_\_ Work: ( \_\_\_\_\_ ) \_\_\_\_\_

Home: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

SI Supervisor/Sponsor and Phone Number: \_\_\_\_\_

Your SI Affiliation (federal or trust employee, volunteer, fellow, visitor): \_\_\_\_\_

Your SI Classification (curator/scientist, associate, specialist/technician, etc.): \_\_\_\_\_

Your SI Office Location or SI Sponsoring Office (Building and room #): \_\_\_\_\_

### Scientific Diving Certifications:

University, State, Federal or Private Organization: \_\_\_\_\_

Certification dates: \_\_\_\_\_ to: \_\_\_\_\_ Depth: \_\_\_\_\_ Diving Officer: \_\_\_\_\_

Specialties: \_\_\_\_\_

Dive Computer: Training Date \_\_\_\_\_ Manufacturer and Model \_\_\_\_\_

### Recreational Diving Certifications:

<u>Agency</u>	<u>Certification level</u>	<u>Date</u>	<u>Location</u>	<u>Instructor and number</u>

### Diving Activity:

Total number of dives \_\_\_\_\_ Total underwater hours \_\_\_\_\_ Greatest depth: \_\_\_\_\_

Cumulative total number of dives per depth to date:

0-30': \_\_\_\_\_ 31-60': \_\_\_\_\_ 61-100': \_\_\_\_\_ 101-130': \_\_\_\_\_ 131-150': \_\_\_\_\_ 151-190': \_\_\_\_\_

Total dives in last 12 months: \_\_\_\_\_ Date of last dive: \_\_\_\_\_

### Emergency Information: Person to notify in case of emergency:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Address: \_\_\_\_\_ Zip code: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_