



**PADI**  
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# Rescue Diver Course Training Documentation and Referral Form

Student Name \_\_\_\_\_ Birth Date (D/M/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Student Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State/Province \_\_\_\_\_  
 Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_\_ Business Phone (\_\_\_\_) \_\_\_\_\_  
 Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

	Knowledge Review Completed	Date Completed	Initials Student / Instructor	PADI No.
<b>I. Knowledge Development Presentations</b>				
Presentation One	<input type="checkbox"/>	____/____/____	____/____	_____
Presentation Two	<input type="checkbox"/>	____/____/____	____/____	_____
Presentation Three	<input type="checkbox"/>	____/____/____	____/____	_____
Presentation Four	<input type="checkbox"/>	____/____/____	____/____	_____
Presentation Five	<input type="checkbox"/>	____/____/____	____/____	_____

## II. Rescue Training Exercises – Indicate location of Training Exercises

	Pool	Open Water	Date Completed	Initials Student / Instructor	PADI No.
Self Rescue Review	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 1 – Tired Diver	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 2 – Panicked Diver	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 3 – Response from Shore, Boat	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 4 – Distressed Diver Underwater	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 5 – Missing Diver	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 6 – Surfacing the Unresponsive Diver	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 7 – Unconscious Diver at the Surface	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 8 – Exiting the Unresponsive Diver	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 9 – First Aid for Pressure-related Injuries and Oxygen Administration	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____
Exercise 10 – Response from Shore/Boat Unresponsive Diver	<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	____/____	_____

## III. Open Water Rescue Scenarios

Open Water Rescue Scenario One	____/____/____	____/____	_____
Open Water Rescue Scenario Two	____/____/____	____/____	_____
<b>Final Examination</b>	____/____/____	____/____	_____

## Emergency First Response Primary Care (CPR) and Secondary Care (First Aid)

PADI Member Name \_\_\_\_\_ Signature \_\_\_\_\_  
 PADI No. \_\_\_\_\_ Dive Center/Resort No. 789 Date (D/M/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Phone ( 440 ) 324-3434 Fax ( 440 ) 324-3457 Email udc@underwaterdive.com

## PADI Instructors Involved in Training

PADI Instructor Name \_\_\_\_\_ Signature \_\_\_\_\_  
 PADI No. \_\_\_\_\_ Dive Center/Resort No. 789 Date (D/M/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Phone ( 440 ) 324-3434 Fax ( 440 ) 324-3457 Email udc@underwaterdive.com

PADI Instructor Name \_\_\_\_\_ Signature \_\_\_\_\_  
 PADI No. \_\_\_\_\_ Dive Center/Resort No. 789 Date (D/M/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Phone ( 440 ) 324-3434 Fax ( 440 ) 324-3457 Email udc@underwaterdive.com

# Referral Procedure

The purpose of this procedure is to allow a student diver to complete a PADI Rescue Diver course with more than one PADI Instructor. A PADI Rescue Diver student may be referred to another PADI Instructor after completing any knowledge development session, training exercise and/or open water rescue scenario. **The student diver must complete the entire session, exercise or scenario to receive referral credit for that session, exercise, or scenario.**

To refer a PADI Rescue Diver student, use this PADI Rescue Diver Course Training Documentation and Referral Form found in the Appendix of the PADI Rescue Diver Instructor Guide. This form, along with the diver's completed Medical Statement, may be given directly to the diver to continue PADI Rescue Diver training with another PADI Instructor.

**A PADI Rescue Diver Course Training Documentation and Referral Form is valid for 12 months from the last training segment completion date. Prior to conducting a Rescue Diver exercise for a referred student, a preassessment and the administrative requirements as outlined in PADI "General Standards and Procedures" must be completed (i.e. signed Medical Statement, Standard Safe Diving Practices Statement of Understanding, and Liability Release and Assumption of Risk Agreement.) All PADI Instructors involved in the referral process, initial training or subsequent training, must retain a copy of the administrative paperwork, as well as the Rescue Diver Course Training Documentation and Referral Form. The instructor who conducts the student diver's final open water training ensures that the diver has met all certification requirements and certifies the diver.**

When you receive a Rescue Diver referral student, you may check the status of PADI Instructors who previously signed off on the training documentation form by calling your PADI Office.

## Important Points for the Diver

1. Verify that the PADI Instructor(s) who will complete your training is in Teaching Status.
2. Take this form, along with a copy of your completed PADI Medical Statement and a photograph to the PADI Dive Center, PADI Resort or PADI Instructor completing your training.
3. This referral form is valid for 12 months after the last training session completion date, however you should complete your training as soon as possible.
4. Retain this form until you have completed all required training sessions.
5. The PADI Instructor(s) continuing your training will preassess your skills and knowledge and review anything that may be unclear.
6. Upon completion of all required training, you and the PADI Instructor will complete a Positive Identification Card (PIC) envelope. This envelope must be submitted to PADI along with your photo to obtain a certification card.

## Important Points for the Referring Instructor(s)

1. Fill in the requested information on this form, including the diver's name and address and your contact information. Also, fill in the appropriate areas of training completed before referring the diver.
2. Attach a copy of the diver's PADI Medical Statement to this form. Also advise the diver of the need for a photo for certification card processing.
3. Give the diver the entire form. If possible, assist the diver in making arrangements with a PADI Dive Center, PADI Resort or PADI Instructor for completing training as additional local requirements may apply. Keep a photocopy for your records.
4. Encourage the diver to complete the training as soon as possible. Advise the diver that the form is only valid for 12 months after the last training session completion date.

## Important Points for the Receiving Instructor(s)

1. Preassess the diver's knowledge and skills. Be certain that the diver is adequately prepared to continue training.
2. A diver may be referred after completing any knowledge development session, training exercise and/or open water rescue scenario.
3. Upon completion of each component, initial and date this form in the appropriate area. The diver retains the referral form until the completion of all certification requirements. Retain a photocopy of this form for your records.
4. If you conduct the final open water rescue scenario you are the certifying instructor. Complete and submit a PADI Positive Identification Card (PIC) envelope to PADI for processing. Retain a copy of the completed referral form for your records and forward a copy to the original instructor for his records.

**QUESTIONS – About how to use the form?  
Call PADI.**