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Application for CMAS- ISA Night Diver Instructor Certification

1. Personal Particulars of Applicant			
a) Surname:		b) Names:	
c) ID Number:		d) Postal Address:	
e) Instructor Level	2 Star	3 Star	
f) Instructor Certificate No:			
g) Telephone (H)	Code:	Number:	
Telephone (W)	Code:	Number:	
Telephone (Mobile)			
h) Fax No:	Code:	Number:	
i) E-mail address			
2. Requirements for Certification			
Requirement	Initial		
a) I am at least 18 years of age.			
b) I am a registered in-date CMAS-ISA Instructor.			
c) I hold a CMAS - ISA Night Diver certificate or equivalent			
e) I have successfully completed at least 30 open water Night dives.			
d) During the past 12-months, I have been certified as medically fit, by a medical practitioner, to participate in underwater sport.			
e) As a CMAS Instructor, I have certified at least 25 CMAS One Star Divers or a combination of One and Two Star divers			
3. Declaration			
<p>I, the above-mentioned, hereby declare under oath:</p> <ul style="list-style-type: none"> a) That the information provided above is correct and truthful; b) That I do not have any objections taking the prescribed oath; c) That I regard the oath as binding on my conscience; and d) That I understand that the CMAS-ISA may require me to submit proof of any information supplied in this application form. <p>Signed: _____ Date: _____</p>	<div style="border: 1px solid black; height: 100px; width: 100%; margin-bottom: 10px;"></div> <p style="text-align: center;">Official Stamp of Commissioner of Oath.</p> <p>Signed: _____ Date: _____</p>		