



Diver Experience Form

Name: _____ Height: _____ Weight: _____ Date of Birth: __/__/__

Phone: _____ Email: _____

City of Residence: _____

List diving courses, instruction or other trainings you've taken (*Applicants must have a minimum of Advanced Open Water certification OR a minimum of 100 lifetime logged dives*):

Course or certification	Agency	Cert. #	Date	Location
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				

Do you own your SCUBA gear? YES NO (own a drysuit own a 7mm wet suit)

Total lifetime logged dives: _____

How many dives have you completed and logged in the last 12 months? _____

How many logged [in the last 12 months] were in COLD water (<65°F)? ____ WARM water? ____

Do you have previous experience diving in aquariums or an occupational setting? YES NO

If YES, please list which facility and how many years you dove there:

Are you able to make a one-year commitment to the Volunteer Diver Program? YES NO

Please indicate with an "X" all of the times that you are available to dive (*Volunteer Divers are asked to commit to a minimum of one shift every month for at least one continuous year*):

	MON	TUES	WED	THURS	FRI	SAT	SUN
Passages of the Deep 9:00am-2:00pm							

Please return this form to:
Oregon Coast Aquarium Volunteer Services, 2820 SE Ferry Slip Rd, Newport, OR 97365
OR by email to volunteers@aquarium.org

This form must be received approximately one month before the Dive Program Orientation to be considered (see www.aquarium.org/support/volunteer/adult/ for upcoming dates)