



First Name

Last Name:

By placing my name here, I agree to be responsible for the content of this page.

Open Water Diver Completion Record

This record is applicable for the following programs:

- Referral Diver
- Indoor Diver
- Scuba Diver
- Open Water Diver

Academic Sessions Completed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Pool/Confined Water Skills For Scuba Diver

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Pool/Confined Water Skills For Open Water Diver

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Open Water Training Dive 1 Completed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Open Water Training Dive 2 Completed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Open Water Training Dive 3 Completed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Open Water Training Dive 4 Completed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Additional Open Water Dive (Optional)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Additional Open Water Dive (Optional)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Skill Evaluations for Scuba Diver

- Equipment Adjustment
- Putting on a Scuba Unit
- Pre-Dive Check
- Entries
- Snorkeling Skills
- Survival Float
- Swim Assessment
- Buoyancy Check with a Total Diving System
- Regulator Breathing (No Mask)
- Regulator Clearing (Purge and Exhale)
- Regulator Retrieval (Arm Sweep and Alternate)
- Mask Clearing (Partial and Full Flood)
- Controlled Descent
- Mask Removal and Replacement
- Stationary Air Sharing
- Neutral Buoyancy (Power Inflation and Oral Inflation)
- Fin Techniques (Scuba)
- Controlled Ascent
- Safety Stop
- Snorkel/Regulator Exchange
- Surface Swim 25 Meters/25 Yards
- Deep Water Exit
- Scuba Unit Disassembly
- Equipment Care (Scuba)

Additional Skill Evaluations for Open Water Diver

- Removing and Replacing the Weight System (Surface and Underwater)
- Free Descent
- Removing and Replacing the Scuba Unit (Surface and Underwater)
- Disconnect and Reconnect the Inflator Hose
- No-Mask Swim
- Breathing from a Free-flowing Regulator
- Air Sharing Ascent
- Emergency Buoyant Ascent (EBA)
- Emergency Swimming Ascent (ESA)
- Rescue Skills (Approach, Cramp Removal and Tows)
- Surface Marker Buoy (SMB) Deployment
- Reciprocal Compass Course

Final Exam

Scuba Diver Open Water Diver

The exam results have been reviewed with the instructor and all questions initially answered incorrectly are now fully understood by the student.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Diver Initials	Date (DD/MM/YY)	Instructor Initials	SSI Pro Number

Student has successfully completed all Academic Sessions, all Skill Evaluations, and has passed the Final Exam. Student has met all requirements for certification in this SSI program. Student reaffirms that they will comply with the SSI Responsible Diver Code for all dives.

Certification Level

Referral Diver Scuba Diver Indoor Diver Open Water Diver

<input type="text"/>	<input type="text"/>
Student Signature	Date (DD/MM/YY)
<input type="text"/>	<input type="text"/>
Signature of Parent/Guardian (When Applicable)	Date (DD/MM/YY)

<input type="text"/>	<input type="text"/>
Instructor Name (PRINTED)	Date (DD/MM/YY)
<input type="text"/>	<input type="text"/>
Instructor Signature	MySSI Pro Number

A=50

50 QUESTION ANSWER FORM

Program Name:

Student Name:

Date:

SSI Dive Pro Name:

SSI Dive Pro. No.:

Student Signature: (After test has been corrected and reviewed with the Instructor)

Grade:

- | | | | |
|---------------------|---------------------|---------------------|---------------------|
| 1. (A) (B) (C) (D) | 13. (A) (B) (C) (D) | 26. (A) (B) (C) (D) | 39. (A) (B) (C) (D) |
| 2. (A) (B) (C) (D) | 14. (A) (B) (C) (D) | 27. (A) (B) (C) (D) | 40. (A) (B) (C) (D) |
| 3. (A) (B) (C) (D) | 15. (A) (B) (C) (D) | 28. (A) (B) (C) (D) | 41. (A) (B) (C) (D) |
| 4. (A) (B) (C) (D) | 16. (A) (B) (C) (D) | 29. (A) (B) (C) (D) | 42. (A) (B) (C) (D) |
| 5. (A) (B) (C) (D) | 17. (A) (B) (C) (D) | 30. (A) (B) (C) (D) | 43. (A) (B) (C) (D) |
| 6. (A) (B) (C) (D) | 18. (A) (B) (C) (D) | 31. (A) (B) (C) (D) | 44. (A) (B) (C) (D) |
| 7. (A) (B) (C) (D) | 19. (A) (B) (C) (D) | 32. (A) (B) (C) (D) | 45. (A) (B) (C) (D) |
| 8. (A) (B) (C) (D) | 20. (A) (B) (C) (D) | 33. (A) (B) (C) (D) | 46. (A) (B) (C) (D) |
| 9. (A) (B) (C) (D) | 21. (A) (B) (C) (D) | 34. (A) (B) (C) (D) | 47. (A) (B) (C) (D) |
| 10. (A) (B) (C) (D) | 22. (A) (B) (C) (D) | 35. (A) (B) (C) (D) | 48. (A) (B) (C) (D) |
| 11. (A) (B) (C) (D) | 23. (A) (B) (C) (D) | 36. (A) (B) (C) (D) | 49. (A) (B) (C) (D) |
| 12. (A) (B) (C) (D) | 24. (A) (B) (C) (D) | 37. (A) (B) (C) (D) | 50. (A) (B) (C) (D) |
| | 25. (A) (B) (C) (D) | 38. (A) (B) (C) (D) | |