



CERTIFICATION CARD REPLACEMENT FORM

1251 East Dyer Road #100 • Santa Ana, CA 92705-5605 USA • (714) 540-7234 • FAX: (714) 540-2609 • http://www.padi.com

INSTRUCTIONS

Complete this form if one or more of the following apply:

- Your diver level certification card was lost.
- Your diver level certification card was damaged.
- You changed your name (include a copy of legal documentation of name change).
- You are upgrading from any junior level certification.
- You would like to replace your existing card with a NEW Project A.W.A.R.E. Edition Certification Card.

Provide all pertinent information to the best of your knowledge. If you are unable to provide information in either section, please indicate the exact or approximate year of certification.

The more information you provide, the quicker we can process your request.

If you have never received your initial certification card, contact either your PADI Instructor, Dive Center or PADI to obtain the proper form.

PHOTO REQUIRED

Enclose one 13/4" X 21/4"/4.5 cm X 5.7 cm photograph of yourself to be used on your certification card. Be sure to submit a clear, unobstructed, color photo to guarantee quality. Eyes must be visible if wearing glasses.

PLEASE INDICATE CARD TYPE. If you do not indicate a card type, you will automatically receive a standard certification card.

Project AWARE Card

\$2 of your processing fee will be donated to the Project AWARE Foundation.

Standard PADI Card

PLEASE TYPE OR PRINT CLEARLY

SECTION 1 — Required

Certification No. _____

Instructor _____ PADI Instructor No. _____

Dive Center _____ Store No. _____

Level of Certification _____ **Date of Certification** (or approximate year) _____

Diver Name (as printed on original certification card) _____

Mailing Address _____

City _____ State/Province _____

Country _____ Zip/Postal Code _____

Home Phone (_____) _____ Business Phone (_____) _____

Date of Birth _____ Sex: Male Female
Month/Day/Year

SECTION 2 — Complete Section 2, Part A and B, ONLY if you are unable to enclose a copy of your PADI Validation Card. All PADI certification cards issued after 1980 included a PADI Validation Card.

PART A State and country where certified _____

Date you received your original certification card _____ (If uncertain, please approximate.)
month/year

Course completion date _____ **Have you ever replaced your certification card?** Yes No

If yes, what year? _____ If 1980 or later, please list student number _____

Please indicate the level of certification for which you are requesting replacement:

- | | |
|--|--|
| <input type="checkbox"/> Skin Diver | <input type="checkbox"/> Medic First Aid (Does not require photo.) |
| <input type="checkbox"/> Basic Diver | <input type="checkbox"/> Rescue Diver |
| <input type="checkbox"/> Junior Open Water Diver | <input type="checkbox"/> Divemaster (Certification prior to 1984.) |
| <input type="checkbox"/> Open Water Diver | <input type="checkbox"/> Specialty _____ |
| <input type="checkbox"/> Advanced Open Water Diver | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Advanced Plus | |

Tape / Attach a
1 3/4" x 2 1/4"

Head and Shoulder Photo

**PRINT NAME ON
BACK OF PHOTO**

Coin Machine Photos OK
No Dark Glasses

SECTION 2 (continued)

PART B Completion of this section is not required; however, this additional information will expedite the replacement of your certification card. This information is useful in circumstances where there is difficulty locating your records.

If available, submit a copy of one of the following along with this form (do not send original):

1. A signed and dated PADI temporary certification card.
2. A signed letter from the certifying instructor/dive center (including date and level of certification, PADI Instructor's name and number).
3. A copy of a signed PADI diploma.
4. A copy of your original certification envelope.
5. A copy of both sides of your original certification card

OR

Complete Box A or Box B, whichever applies.

BOX A — To be used by original certifying instructor ONLY

_____ CERTIFYING INSTRUCTOR'S NAME (Please Print)

_____ INSTRUCTOR NO.

_____ DIVER'S CERTIFICATION LEVEL

_____ DIVE CENTER NAME AND STORE NUMBER

_____ ORIGINAL
CERTIFICATION DATE
(Must include month, day & year.)

_____ INSTRUCTOR'S SIGNATURE

BOX B — To be used by original dive center ONLY if the certifying instructor cannot be contacted or is no longer with the dive center.

The student's certification may be verified by either the facility owner, manager or another PADI Instructor (of the original store). The verifying person must attest that the original student records are on file with the Dive Center, as PADI may request that such records be supplied.

_____ ORIGINAL CERTIFYING INSTRUCTOR'S NAME

_____ INSTRUCTOR NUMBER

_____ DIVER'S CERTIFICATION LEVEL

_____ DIVER'S CERTIFICATION DATE
(Must include month, day and year.)

_____ DIVE CENTER NAME

_____ VERIFYING INDIVIDUAL'S NAME (Please Print)

_____ VERIFYING INDIVIDUAL'S TITLE

_____ VERIFYING INDIVIDUAL'S SIGNATURE

SECTION 3 — Required

PAYMENT METHOD

Check — **Must be payable to PADI in U.S. dollars**, and drawn on a U.S. bank

Mastercard VISA Expiration Date _____

Card No. _____

Cardholder Name _____

Authorized Signature _____

MAIL TO — Research Department
PADI International, Inc.
1251 East Dyer Road #100
Santa Ana, CA 92705-5605

CHECKLIST

- \$20 Processing Fee for Standard Certification Card.
 \$30 PRIORITY (48-hour) Processing for Standard Card.
OR

- \$22 Processing Fee for Project A.W.A.R.E. Card.
(\$2 donation to Project A.W.A.R.E. Foundation.)
 \$32 PRIORITY (48-hour) Processing for Project A.W.A.R.E. Card.
(\$2 donation to Project A.W.A.R.E. Foundation.)
 Photograph — 13/4" x 21/4"
Coin machine photo is okay — **no dark glasses**
 Photocopy of acceptable verification (See Section 2, Part B)

All Certification Cards are sent by 1st Class Mail.

If you chose to use our priority service, your certification card will be processed within 2 working days after receipt of this application.

- Check here and fill in the blank if you wish to specify choice of priority mail.

Mail service _____

If you choose this option, you must include a separate check sufficient to cover mailing costs.

PADI is not responsible for forms, copies or photos that are damaged, lost or delayed in the mail.

PLEASE ALLOW 3-4 WEEKS FOR THE PROCESSING OF YOUR CARD

Should additional information be necessary or a problem arise, you will be notified as soon as possible.