

**APPENDIX 6**  
**AAUS REQUEST FOR DIVING RECIPROCITY FORM**  
**VERIFICATION OF DIVER TRAINING AND EXPERIENCE**

UNIVERSITY OF ALASKA SCIENTIFIC DIVING PROGRAM  
SCHOOL OF FISHERIES & OCEAN SCIENCES  
UNIVERSITY OF ALASKA FAIRBANKS  
FAIRBANKS, ALASKA 99775-7220  
<http://www.sfos.uaf.edu/dive/>

Date:

To:

From:

Subject:           Scientific Diving Reciprocity

This letter certifies that \_\_\_\_\_ has been issued a \_\_\_\_\_ depth certification under the current *University of Alaska Scientific Diving Safety Manual* regulations and is a currently certified UA Scientific Diver. The UA Scientific Diving Program is a current Organizational Member of the American Academy of Underwater Sciences and adheres to the *AAUS Standards for Scientific Diving Certification and Operation of Scientific Diving Programs*. The following is a brief summary of this diver's file regarding diving status at UA. Unless otherwise specified under "Specialties", this diver is authorized to perform no-decompression, open water, compressed air scuba dives to the depth certification indicated above.

Regulator/equipment maintenance expiration date: \_\_\_\_\_.  
Diving medical expiration date: \_\_\_\_\_.  
First aid expiration date and agency: \_\_\_\_\_.  
CPR expiration date and agency: \_\_\_\_\_.  
Oxygen administration expiration date and agency: \_\_\_\_\_.  
Number of dives completed within the previous 12 months: \_\_\_\_\_.  
Maximum depth in last 12 months: \_\_\_\_\_.  
Date of last dive: \_\_\_\_\_.  
Check-out dive: \_\_\_\_\_.  
Scientific diving written exam: \_\_\_\_\_.

Specialties:

_____ Dry suit	_____ Rescue	_____ Blue water
_____ Dive Computer	_____ Divemaster	_____ Altitude
_____ Nitrox	_____ Instructor	_____ Ice/Polar
_____ Mixed gas	_____ EMT	_____ Cave
_____ Closed circuit	_____ Dive Accident Management	_____ Night
_____ Saturation	_____ Chamber operator	Other: _____.
_____ Decompression	_____ Lifesaving	

Diver's name, address, email address, phone and fax number:

Diver's emergency contact information:

Please do not hesitate to contact me if I may be of further assistance: [jewett@ims.uaf.edu](mailto:jewett@ims.uaf.edu) 907-474-7841, 907-474-7204 fax