 **NEW DIVER/ SNORKELLER EVALUATION FORM**

Evaluation undertaken for:  Scuba Diving  Snorkelling  In Open Water  In Pool

**Diver Name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **2.1 Swim Fitness Evaluation** |  |
| 1. Perform a 400 metre swim in under 12 minutes (no fins); | Y  N |
| 1. Tread water for 10 minutes (no fins); | Y  N |
| 1. Swim 200 metres on surface in full SCUBA gear using snorkel in under 15 mins; | Y  N |
| 1. Perform an inert diver tow. That is, in less than 5 minutes tow or push another diver a distance of 50 metres, with both divers in full SCUBA or Snorkel equipment. | Y  N |
| **2.2 SCUBA Diving Skill Evaluation** |  |
| 1. Fully assemble equipment, perform necessary checks and enter water; | Y  N |
| 1. Demonstrate controlled descent with ear equalisation; | Y  N |
| 1. Demonstrate mask clearing then mask removal; | Y  N |
| 1. Demonstrate buoyancy control with fin pivot; | Y  N |
| 1. Demonstrate regulator recovery and clearing; | Y  N |
| 1. Demonstrate use of alternative air source, while stationary; | Y  N |
| 1. Demonstrate removal and replacement of SCUBA equipment; | Y  N |
| 1. Demonstrate active buddy checks with air checks; | Y  N |
| 1. Demonstrate controlled ascent rate of 9 metres per minute; | Y  N |
| 1. Demonstrate weight belt removal and replacement at surface; | Y  N |
| 1. Perform a safe and controlled rescue of a simulated unconscious non-breathing buddy diver (advanced); | Y  N |
| 1. Discuss University dive protocol, communication signals and emergency procedures. | Y  N |
| **2.3 Snorkel Diving Skill Evaluation** |  |
| 1. Demonstrate snorkel and mask clearing; | Y  N |
| 1. Demonstrate ear equalisation on descent; | Y  N |
| 1. Duck dive to 2 metres and retrieve an item from that depth: | Y  N |
| 1. Perform a safe and controlled rescue of a simulated unconscious non-breathing buddy snorkeller (advanced); | Y  N |
| 1. Discuss University snorkelling protocol, communications signals and emergency procedures. | Y  N |

**Evaluation undertaken by Dive Coordinator:**

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| *Name:* | *Signed*: | *Date*: |

**Comments on divers in-water comfort and any other skills evaluated:**

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**Maritime Safety Dive Officer sighted:**

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| *Name:* | *Signed*: | *Date*: |