



Member Update Form (Page 1 of 2)

To be used by inactive members and/or Instructor Trainers to verify renewal or update requirements

	First	Middle	Last
Member Name:			
Address:			
City:	State:	Postal code:	
		Country:	
Phone: (H)	(W)	(M)	
Birth date (mm/dd/yyyy):	E-mail:		

SDI/TDI/ERDI Member Number (REQUIRED):	
Date last renewed with SDI/TDI/ERDI:	
SDI/TDI/ERDI Facility affiliation:	
Highest SDI/TDI/ERDI Professional rating:	
Date of last scuba diving medical:	(attach copy)
Date of last CPR and first aid certification:	(attach copy)

Other Agency Membership(s)

(List of any other agency memberships and current status. Include student count for past 2 years)

Certification:	Agency:	Certification #:
Current Status:		Date Last Active: / /
Certification:	Agency:	Certification #:
Current Status:		Date Last Active: / /

Level of Rating(s) Being Updated

1:	
2:	
3:	

Instructor Trainer Details

Name:	Member #:
E-mail:	Phone:



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Location of Update:

Update Components

(ITs must initial the relevant subject line(s) verifying the updating member has completed all the necessary skill performance and graduation requirements for the applicable instructor level course(s). Attach notes if necessary.

IT's Initials

Subjects:

- Online Professional Familiarization Program
- SDI Standards and Procedures Review
- TDI Standards and Procedures Review
- ERDI Standards and Procedures Review
- Current Training Updates Review
- SDI Instructor Evaluation Course *(required for SDI instructors updating)*
- Classroom Presentation
- Confined Water Lesson
- Open Water Lesson
- Written Exam Completed *(with 100% remediation as required)*
- First Response Training International Programs (specify)
- TDI Open Circuit Instructor Course (specify)
- TDI SCR Instructor Course (specify)
- TDI CCR Instructor Course (specify)
- TDI Overhead Environment Instructor Course (specify)
- ERDI Instructor Course Skill Performance Requirements
- Other (specify)
- Other (specify)
- Other (specify)

Number of academic presentations completed:

Number of confined water dives completed:

Number of open water dives completed:

Max depth:

Date update completed:

Declaration by Member: *I fully understand and have completed all the requirements for this instructor update and am in possession of current student manuals and instructor guides for the ratings I hold. I also understand that this update does not guarantee renewal of membership or active teaching status and I am not authorized to teach SDI/TDI/ERDI programs until I have received approval from the HQ Training Department. I certify that I have no outstanding quality assurance issues with any scuba certifying agency and know of no reason that my status may not be renewed.*

Signature:

Date:

Declaration by instructor trainer: *I verify that the member has satisfactorily completed all the requirements of this instructor update to the level required by current SDI/TDI/ERDI Standards.*

Signature:

Date: