



Republic of the Philippines
DEPARTMENT OF TOURISM
PHILIPPINE COMMISSION ON SPORTS SCUBA DIVING



APPLICATION NO. _____

APPLICATION FOR ACCREDITATION FOR SCUBA DIVING INDIVIDUALS

ACCREDITATION APPLIED FOR:
PROFESSIONAL- P 1,000.00

NON-PROFESSIONAL- P 500.00

Dive Instructor

SCUBA Diver

Dive Master

2 x 2”
ID picture

The Executive Director
Philippine Commission on Sports Scuba Diving
Department of Tourism Building - Makati, NCR

Sir/Madam:

Pursuant to the provisions of Letter of Instruction No. 745, and the PCSSD Rules and Regulations governing the accreditation of dive individuals in the Philippines, referencing to the Tourism Act of 2009 - Republic Act 9593, Section 31, attaching the Philippine Commission on Sports SCUBA Diving (PCSSD) to the Department of Tourism (DOT). I hereby apply for accreditation.

The following are facts related to my capacity to engage in such:

NAME OF APPLICANT:					
Address:					
Manila Address (If any) :					
Email Address:			Mobile:	Landline:	
Gender:	Date of birth:		Nationality:	Civil status:	
Emergency contact:		Address:		Number:	
Height: meters	Weight: kg	Hair color:	Eye color:	Blood Type:	Religion:

CERTIFICATION HISTORY:				
(Please provide copies, N/A if it is not applicable)	Certifying Agency	Member No.	Date Issued	Valid Until
<input type="checkbox"/> Divemaster <input type="checkbox"/> Dive Instructor <input type="checkbox"/> Non-pro				
Nitrox/Technical Diver Training <input type="checkbox"/> Yes <input type="checkbox"/> No				
Life-Saving Training (International Life Saving [ILS], PADI Rescue / EFR, Red Cross, etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No				
First-Aid Training (International Life Saving [ILS], Red Cross, EFR, ILCOR/ PHA CPR Extended Council-recognized) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Cardio Pulmonary Resuscitation (CPR) & AED <input type="checkbox"/> Yes <input type="checkbox"/> No				
Oxygen Provider Training <input type="checkbox"/> Yes <input type="checkbox"/> No				

OTHER IMPORTANT DOCUMENTS:		
(Please provide copies, and put N/A if it is not applicable to you)	Date Issued	Valid Until
Insurance Policy for diving accident coverage for the current year – if applicable		

FOR FOREIGN NATIONALS:		
(Please provide copies, and put N/A if it is not applicable to you)	Date Issued	Valid Until
Employment permit from the Department of Labor and Employment (DOLE)		
Alien Certificate of Registration (ACR) or VISA from the Commission on Immigration and Deportation (CID)		

I hereby certify that all foregoing data / information and the supporting documents required by the application are true and correct. I certify that I am of good moral character and have not been convicted of any criminal offense.

Furthermore, I will abide by the Implementing Rules and Regulations (IRR) of Sports Scuba Diving and other subsequent memoranda/circulars issued by the PCSSD.

Date of undertaking	<div style="border: 1px solid black; height: 80px; width: 100%;"></div>
Printed name of applicant	

Signature specimen of Applicant

Payments can be made through any Land Bank of the Philippines (LBP) Branch:

Accreditation Fee for: **Dive Instructor/ Dive Master** is PhP 1000.-
Non-professional SCUBA Diver is PhP 500.-
 Account Name: Philippine Commission on Sports Scuba Diving
 Account No.: 0052140072

Accreditation Form and Deposit Slip should be emailed to:

E-mail: accreditation@divephilippines.com.ph / pcssd_dot@yahoo.com.ph

YOU CAN VERIFY RECEIPT OF YOUR ACCREDITATION FORM BY CALLING THE PCSSD OFFICE

Voice: +63 2 524.22.42 / +63 2 586.4903 / +63 917 558.3783

Date of Filing _____
 Processed by _____
 Remarks _____

Approved by:

KAREN A. CHAN
 Executive Director