NATIONAL FEDERATION Nº

# CMAS FOUR STAR INSTRUCTOR APPLICATION FORM

## PERSONAL INFORMATION

| | | | | | |
|---|---|---|---|---|---|
| FULL NAME | | | | | |
| SEX | MALE | | FEMALE | | DATE OF BIRTH | |
| PLACE OF BIRTH | | | | NATIONALITY | |
| ADDRESS | | | | | |
| ZIP/ POSTAL CODE | | CITY/TOWN | | COUNTRY | |
| TEL Nº | | | | EMAIL | |

## TRAINING HISTORY - INSTRUCTOR'S CAREER

| CMAS TRAINING PROGRAM | CMAS FEDERATION | DATE OF ISSUE | CERTIFICATE Nº | FEDERATION APPROVAL |
|---|---|---|---|---|
| ONE STAR INSTRUCTOR | | | | |
| TWO STAR INSTRUCTOR | | | | |
| THREE STAR INSTRUCTOR | | | | |
| U.W. NAV INSTRUCTOR | | | | |
| O2 ADMI.INSTRUCTOR | | | | |
| TEK.DIVING INSTRUCTOR | | | | |
| SPECIALITY INSTRUCTOR | | | | |
| OTHERS | | | | |

## TRAINING HISTORY

Copies of the original certificates must be attached.

| SESSIONS | DATE | N. OF CANDIDATES CERTIFIED | FEDERATION APPROVAL |
|---|---|---|---|
| THREE STAR INSTRUCTOR 1 | | | |
| THREE STAR INSTRUCTOR 2 | | | |
| THREE STAR INSTRUCTOR 3 | | | |
| THREE STAR INSTRUCTOR 4 | | | |

## HISTORY AND POSITION WITHIN THE NATIONAL FEDERATION

The copie of federation recommendation must be attached.

| POSITION IN THE NATIONAL FEDERATION | TECHNICAL INNOVATIONS | SPECIFIC CONTRIBUTIONS |
|---|---|---|
| | | |

| PRESIDENT OF FEDERATION SIGNATURE |
|---|
| |

## CMAS TECHNICAL COMMITTEE APPROVAL

| | | |
|---|---|---|
| RESULT | APPROVED ☐ | TECHNICAL COMMITTEE SIGNATURE |
| | NOT APPROVED ☐ | |
| | PENDING ☐ | |
| DATE | | |

BOARD OF DIRECTORS VISA N°: 232