



SCUBA Dive Itinerary

Department: _____ Field Team Leader: _____

Dive Location: _____

Date of Dive(s): _____ Field Safety Plan Submitted (Date): _____

Trip Information

Departure Time: _____ Port or Boat Launch: _____

Expected Return: _____ Purpose of Dive: _____

Anticipated Length of Dive: _____ Depth: _____

Specific Dive Location: _____

Directions: _____

Coordinates: _____ Marker Description: _____

For multiple dives, please describe: _____

Diver Information

1. Name: _____ Dive Buddy: _____

Certifying Agency: NAUI _____ PADI _____ SSI _____ Other: _____

Level: Open Water _____ Adv. Open Water _____ Rescue _____ Other: _____

Certification Number: _____

2. Name: _____ Dive Buddy: _____

Certifying Agency: NAUI _____ PADI _____ SSI _____ Other: _____

Level: Open Water _____ Adv. Open Water _____ Rescue _____ Other: _____

Certification Number: _____

3. Name: _____ Dive Buddy: _____

Certifying Agency: NAUI _____ PADI _____ SSI _____ Other: _____

Level: Open Water _____ Adv. Open Water _____ Rescue _____ Other: _____

Certification Number: _____

4. Name: _____ Dive Buddy: _____

Certifying Agency: NAUI _____ PADI _____ SSI _____ Other: _____

Level: Open Water _____ Adv. Open Water _____ Rescue _____ Other: _____

Certification Number: _____

Non-Diver/Snorkeler Information

1. Name: _____ Dive Buddy: _____

2. Name: _____ Dive Buddy: _____

3. Name: _____ Dive Buddy: _____

It is against Central Michigan University policy for individuals to dive or snorkel alone. SCUBA diving must be done using the buddy system with at least two qualified divers in the water at all times.

For multi-day trips, complete a separate SCUBA Dive Itinerary for each day.

Attach this form to your Field Safety Plan prior to departure.