



Regional Instructor Course Application/Recommendation Form

Name:	
Address:	
Post code:	
Phone:	
Email address:	
Branch:	
Membership No:	

Prerequisites to course attendance	Evidence (Please bring your Qualification Record book & log book to the course)
1. Hold current membership of ScotSAC	Renewal date:
2. Hold a current medical certificate	Medical expiry date:
3. Have been a member of ScotSAC for at least one year	Date first joined:
4. Have maintained an active status as a Branch Instructor for at least one year	Date of BI award:
5. Hold the ScotSAC Master Diver award	Date award gained:

Branch Diving Officer recommendation	
I, _____, Branch Diving Officer for _____ Branch, recommend the above candidate for the ScotSAC Regional Instructor Course. In my opinion, (s)he is a competent and active Branch Instructor and is a suitable candidate for the role of Regional Instructor. I certify that (s)he has met ALL the prerequisites for the course.	
Signed Instructor number	Date

Regional Coach recommendation	
I, _____, Regional Coach for _____ Branch, recommend the above candidate for the ScotSAC Regional Instructor Course. In my opinion, (s)he is a competent and active Branch Instructor and is a suitable candidate for the role of Regional Instructor.	
Signed Instructor number	Date

Candidate declaration	
I have read and understood the Regional Instructor role description and the requirements of the course. I confirm that I meet ALL the prerequisites. I also understand that I may be required to go through a Protecting Vulnerable Group Scheme check. I apply for a funded post on the Regional Instructor course.	
Signed	Date

Completed forms should be sent or emailed to:
The Scottish Sub-Aqua Club
Caledonia House,
1 Redheughs Rigg, South Gyle
Edinburgh, EH12 9DQ
hq@scotsac.com

Any queries regarding the course or this form please contact:
nationalcoach@scotsac.com

.....Headquarters use only.....	
Date application received:	Qualifications verified:
Application accepted:	Confirmed with candidate: