



Application for revalidation of the Advanced European Scientific Diver Certificate (AESD)

Full Name: _____

Address: _____

Date of Birth: _____

E-mail contact address: _____

Proof of requirements for revalidation

The applicant has to show proof of:

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- having undertaken 12 dives in the last 12 months,
 - including at least 6 dives in open water environments
 - including a number of minimal 10 dives with a scientific task of work (within the period of five years)
 - acting as “supervisor for scientific diving” according to GUV-R 2112 for at least 20 scientific dives
 - valid confirmation of medical fitness following the trade associational principle for occupational health examinations G31 ‘High Pressure’ (occupational diving) [“*Berufsgenossenschaftlicher Grundsatz für arbeitsmedizinische Vorsorgeuntersuchungen G31 Überdruck (Taucherarbeiten)*”].
 - First Aid (Erste Hilfkurs), respectively revalidation of the First Aid certification (Erste Hilfettraining), dating back no more than 2 years
 - at least one refreshment of diving First Aid, including CPR and oxygen administration to diving casualties, dating back no more than 1 year
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Send:

- **Completed form**
- **Payment document for the administration fee of 15,- €, payable to:** Kommission Forschungstauchen Deutschland, **Keyword: AESD-Verlängerung „your name“**, german account number: 15199979, german bank identification code: 23051030 Sparkasse Südholstein (international: Sparkasse Südholstein IBAN: DE33 2305 1030 0015 1999 79, BIC: NOLADE21SHO).
- **Proof of requirements** listed above. Copies (also digitalized) will be accepted.

To:

Prof. Dr. Philipp Fischer
Certification Authority/German Commission for Scientific Diving

Alfred-Wegener-Institute for Polar and Marine Research
Biological Station Helgoland
27498 Helgoland
Germany
Philipp.Fischer@awi.de

For official use only
Date application received:
Date dispatched:
AESD-Nr:

Approved/Refused.
Date of expiry of certificate (valid 5 years):