



TOM MOUNT CAVE DIVING AWARD APPLICATION

(Version 25.1.0)

An International Award honoring Cave Divers worldwide who have demonstrated exceptional knowledge, skill, and dedication to Cave Diving which has set them apart as a true Cave Diver.

PLEASE PRINT CLEARLY

First Name: _____ Last Name: _____

DOB: _____ Address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

Phone: _____ Type: _____ Email: _____

PREREQUISITES FOR THIS PRESTIGIOUS AWARD AND NOMINATION:

- IANTD Cave Diver or Technical Cave Diver certification
- 100 cave dives, not including training dives

CERTIFICATION REQUIREMENTS and DIVE OPERATION LOG VERIFICATION

I have verified that this applicant holds all required certifications and has logged the required number of dives.

Name of Instructor or Licensee _____ IANTD No. _____

Authorized Signature _____ Date _____

APPLICATION CHECKLIST:

- ☐ Application completed in full.
- ☐ Prerequisite information verification.
- ☐ Application package and any supporting documentation sent to IANTD Headquarters or your local IANTD Licensee Office.

Email: IANTD World Headquarters at certs@iantd.com or your local License Office

IANTD HEADQUARTERS

For IANTD World Headquarters only:

IANTD Quality Assurance Director verified this application, and the award is granted.

IANTD QAD _____ QAD Signature _____ Date _____