

Full name:

1 When and where did you learn to dive?

2 How long have you been a professional diver?

3 Please provide details of your qualifications. Include name of qualification and grade.

4 Who is your current employer?

5 When were you last medically examined for the purposes of diving?

6 Where do you normally dive? Please state which countries and whether deep sea, coastal waters, lakes, rivers.

7 Please describe your precise duties whilst diving.

8 Do you ever use explosives?

YES / NO

9 How many times per month do you dive?

10 Depth of dives; please state:

a Maximum depth to which you dive.

b Average depth of dives.

11 Length of dives; please state:

a Maximum length of dive.

b Average length of dives.

12 Do you engage in saturation diving?

YES / NO

If **YES**, how many times per month?

13 Do you always dive as part of a team?

YES / NO

If **YES**, how many divers are in the team?

If **NO**, how many solo dives do you make per month?

14 Have you suffered any diving accidents? **YES / NO**
If **YES**, please provide details.

15 Do you also dive for pleasure? **YES / NO**
If **YES**, please complete the sports diving questionnaire.

I declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment or acceptance of this application.

I agree that this form will constitute part of my application for life assurance and that failure to disclose any material fact known to me may invalidate the contract.

Signature of applicant

Date
