

## NITROX AUTHORIZATION FORM

Verification of training is required for the use of any non-standard breathing mix where the  $fO_2$  is different than 21%.

Name: \_\_\_\_\_

Nitrox Certification Agency: \_\_\_\_\_

Nitrox Certification #: \_\_\_\_\_

Nitrox Certification date: \_\_\_\_\_

Number of Nitrox dives: \_\_\_\_\_

Most recent Nitrox dive: \_\_\_\_\_

Do you own Nitrox tables?       No    Yes

Do you own a Nitrox computer?    No    Yes

Do you own Nitrox tanks?       No    Yes

Do you own a Nitrox analyzer?    No    Yes

Approved by DSO: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: