

APPLICATION FORM

Yes, I want to become a Cruise Director!

PREFERRED INTERNSHIP START DATE (DD/MM/YYYY):	
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PERSONAL DETAILS:

FULL NAME:	
DATE OF BIRTH (DD/MM/YYYY):	
NATIONALITY:	
EMAIL ADDRESS:	
CURRENT CITY & COUNTRY OF RESIDENCE:	
MOBILE NUMBER:	

*****PLEASE SEND A COPY OF THE ID PAGE OF YOUR PASSPORT ALONG WITH THIS APPLICATION*****

DIVING EXPERIENCE

CURRENT QUALIFICATION (HIGHEST):	
NUMBER OF LOGGED DIVES:	
TRAVEL INSURANCE DETAILS:	
DIVING INSURANCE DETAILS:	
ADDITIONAL DIVING QUALIFICATION (EFR, TECH, TEACHING SPECIALTIES, STCW, ETC..):	

*****PLEASE SEND A COPY OF YOUR PROFESSIONAL DIVING QUALIFICATIONS AS WELL AS YOUR DIVE & TRAVEL INSURANCES ALONG WITH THIS APPLICATION*****

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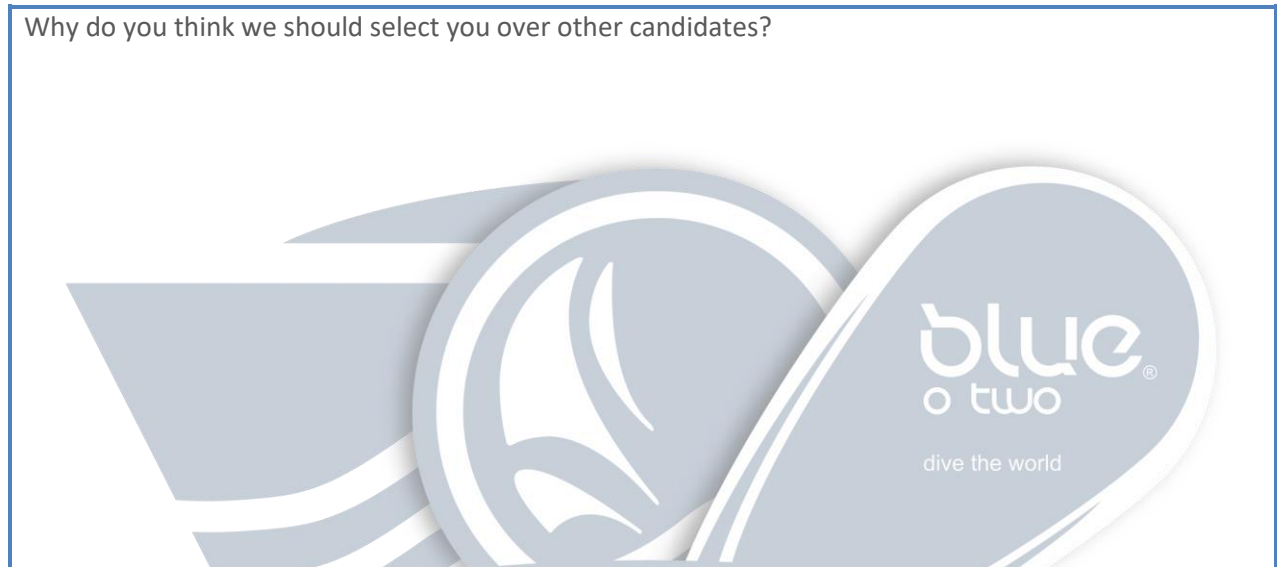
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PREFERRED LOCATIONS

LIST YOUR TOP 5 DESTINATIONS FROM MOST TO LEAST FAVORITE AND INDICATE YOUR PREFERRED LENGTH OF STAY FOR EACH (IN DAYS)

LOCATION	LENGTH OF STAY
1)	DAYS
2)	DAYS
3)	DAYS
4)	DAYS
5)	DAYS

Why do you think we should select you over other candidates?



What is your motivation for participating in this programme?

A large, empty rectangular box with a blue border, intended for the candidate to write their motivation for participating in the programme.

What are your character's strengths & weaknesses?

Send this application to destination.management@wwdas.com along with:

- 1) Passport copy
- 2) A current CV containing a photo
- 3) Professional diving certifications
- 4) Travel & Diving insurances copy

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