



# IRISH WATER SAFETY

Sábháilteacht Uisce, Sábháilteacht Uisce na hÉireann

The Long Walk  
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## Application Form to become an Assistant Swim Teacher

This form complies with the Guidelines as set out in the Code of Ethics & Good practice for Children's sport in Ireland.

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

Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel No : \_\_\_\_\_ Mobile No: \_\_\_\_\_

email Address : \_\_\_\_\_

Date of Birth : \_\_\_\_\_

Date of most recent WS Exam & Venue :  
( attach copy of Current WS Cert held ) \_\_\_\_\_

Water Safety ID Number : \_\_\_\_\_

Any previous experience / involvement in sport / club. Please list :

\_\_\_\_\_

\_\_\_\_\_

Have you been asked to leave a sporting organisation / club ? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes please give details : \_\_\_\_\_

\_\_\_\_\_

### Referee Details :

Please supply the names of two responsible people whom you have contacted and informed that they may be asked to endorse your application for assistant swim teacher award.

( 1 ) Referee Name / Address

( 2 ) Referee Name / Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

email : \_\_\_\_\_

email : \_\_\_\_\_

Phone No : \_\_\_\_\_

Phone No : \_\_\_\_\_