



**STETTLER AQUATIC CENTRE
APPLICATION FOR VOLUNTEER POSITION
WITH THE STETTLER AQUATIC LEADERS-IN-TRAINING
PROGRAM**



NAME: _____ AGE: _____ PHONE #: _____

ADDRESS: _____

E-MAIL: _____ NAME OF PARENTS: _____

SCHOOL: _____ DATE OF APPLICATION: _____

WHY ARE YOU INTERESTED IN APPLYING FOR THIS PROGRAM? _____

WHAT AREAS WOULD YOU BE MOST INTERESTED IN VOULUNTEERING IN? (please check applicable boxes):

Shadow Guarding during busier Swim Sessions Being a victim or bystander for SIM drills Assisting with Facility Maintenance Assisting with Lessons/ Instructing Slide Monitor Assisting with Front End Duties Safety monitoring during low staff periods(Swim Club etc.) Advertisement and Public Education (poster making, etc.) Deck attendant/Helper Fun Leader (Running games, contests, etc. during Open Swims) Other (please describe: _____

WHAT TIMES/ DAYS DO YOU ANTICIPATE BEING AVAILABLE (please make a note of schedule restrictions other than school such as sports, activities, religious days, and seasonal issues)

LIST ANY AWARDS OR TRAINING YOU POSESS (First Aid, Babysitting, Swim Patrol, Bronze, etc.):

WHAT ARE SOME OF YOUR INTERESTS / HOBBIES: _____

LIST ANY JOBS OR VOLUNTEER POSITIONS YOU MAY HAVE HAD (Including babysitting, yard work, etc.):

YOU are encouraged to be available to attend the Stettler Aquatic Center's LIT Bi monthly in-service! (NOTE: These are important for training, team building and for making sure communication is relevant and top notch):

Would you be willing to participate in a regular Aquatic Staff Meeting to practice with other Aquatic Staff Members your function (Duties) as a LIT?

SCHEDULE AVAILABILITY? YES NO

WHAT COURSES WILL YOU BE WORKING ON EARNING CREDITS TOWARDS?

(please circle applicable programs):

Red Cross Swim Kids or Adult Swim Lessons (age 13 and up)

Swim Patrol (Rookie, Ranger, Star) Bronze Star Bronze Medallion Bronze Cross

First Aid/ CPR-C Aquatic Emergency Care(standard first aid with water component)

NL (National Lifeguard Award) Red Cross Assistant Lifeguard

Lifesaving Instructor Water Safety Instructor

Other (please specify): _____

LIST 3 REFERENCES WHOME WE MAY CONTACT (Teacher, Coach, Employer, etc.):

NAME: _____ PHONE : _____

NAME: _____ PHONE: _____

NAME: _____ PHONE: _____

Is there any other information you would like us know about you?

THANK-YOU FOR APPLYING TO THE PROGRAMS!

APPLICANT SIGNATURE _____

PARENT/GUARDIAN SIGNATURE _____

S.A.C. STAFF SPONSOR: _____ SIGNATURE: _____

STETTLER AQUATIC CENTRE ADMINISTRATIVE PURPOSE ONLY:

INTERVIEWED BY: _____ SIGNATURE: _____

CANDIDATE ACCEPTED: YES! NO! DATE: _____

APPROVED BY: _____ SIGNATURE: _____