



# Irish Water Safety

Sábháilteacht Uisce na hÉireann

The Long Walk  
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\_\_\_\_\_ WATER SAFETY AREA COMMITTEE

## APPLICATION FORM TO BECOME A TRAINEE WATER SAFETY INSTRUCTOR

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

Name: \_\_\_\_\_ Date of Birth : \_\_\_\_\_ Tel. No. \_\_\_\_\_

Address: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Reason for applying: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of (1) Rescue 2 Cert: \_\_\_\_\_ (2) BLS 3 Cert: \_\_\_\_\_

Venues: \_\_\_\_\_

Any previous experience/involvement in Sport/Clubs as: (Please tick as appropriate)

(1) A Player Yes \_\_\_\_\_ No \_\_\_\_\_

(2) A Coach, Trainer, Supervisor Yes \_\_\_\_\_ No \_\_\_\_\_

(3) Administrator Yes \_\_\_\_\_ No \_\_\_\_\_

If yes please give details:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

### REFEREE:

Please supply the names of two responsible people whom you have contacted and informed that they may be asked to endorse your application. If you have any previous involvement in sport one of these should be that of an Administrator/leader of your last Club/Place of involvement.

REFEREES NAME/ADDRESS

(1) \_\_\_\_\_

(2) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No. \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## INSTRUCTOR AWARD

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Ireland

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Lo-Call 1890420 202  
email: info@iws.ie  
website: www.iws.ie

RE: \_\_\_\_\_  
(Applicant to become a trainee Instructor)

A chara,

In line with the National Guidelines for the Protection and Welfare of Children the above named person has given your name as one who can support his/her application to become a helper/trainee instructor with Irish Water Safety, \_\_\_\_\_ Area Committee.

I would appreciate it if you complete the box below and return it to me as soon as possible.

Any comments made will be treated in the strictest confidence.

Mise le meas,

\_\_\_\_\_

### Referees Only:

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

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

\_\_\_\_\_

\_\_\_\_\_

I confirm that I know the above named person and state that, to the best of my knowledge, I am satisfied he/she is suitable to be involved with children in a sporting, teaching or supervisory capacity.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_