

Poolsafe Assessor Application Form



Please complete and forward to Aquatics Programme Manager, PO Box 11 123, Manners Street, Wellington 6142, together with your CV. Email: tracey@nzrecreation.org.nz

| PERSONAL DETAILS | | Title | |
|--|--|---------------|--|
| Surname | | First name(s) | |
| Address | | Home phone | |
| | | Work phone | |
| | | Mobile phone | |
| Email | | | |
| Other name(s) by which you have been/or are known by | | | |

EDUCATIONAL / PROFESSIONAL / TRADE QUALIFICATIONS AND/OR ASSOCIATIONS

Please list most recent first

| Qualification/membership | Date obtained/current | Institution/association |
|--------------------------|-----------------------|-------------------------|
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REFEREES

Please provide the details of your written referees. Please indicate (circle choice) if you are willing for us to contact your referees: YES / NO

| | | | |
|----------|--|----------|--|
| Name | | Name | |
| Address | | Address | |
| Phone | | Phone | |
| Email | | Email | |
| Position | | Position | |

DRIVERS LICENCE

| | | | |
|--|----------|------------------|--|
| Current drivers licence | yes / no | Class of licence | |
| Please supply details of any endorsements, conditions and expiry dates listed on your driver's licence (see section 4b, 7, 8 and 9 on your licence): | | | |

EMPLOYMENT INFORMATION

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|-----------------------------|--|--------------|--|
| Current job title | | Organisation | |
| Length of time in this role | | | |

Please list your main responsibilities

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Please detail previous employment details (as above) if current role is less than two years

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FURTHER INFORMATION REQUIRED

State why you think you should be a Poolsafe Assessor

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What benefits would there be to you, your organisation and us if you were a Poolsafe Assessor?

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Detail past experience and successful relationships (outside of your immediate organisation) within the Aquatics industry

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DECLARATION

1. I am able to provide evidence as required to support the information provided in this application.

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|----------------|--------------|
| Signed: | Date: |
|----------------|--------------|