



**SURF LIFE SAVING**  
N O R T H E R N   R E G I O N

**BeachEd INSTRUCTOR  
EMPLOYMENT APPLICATION FORM  
2007 - 2008**

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**This application form applies to the 2007-2008 BeachEd Programme only.**

Please indicate which other roles you are separately applying for:

RLS	<input type="checkbox"/>	Patrol Auditor	<input type="checkbox"/>	Surfcom	<input type="checkbox"/>	RWC/Helicopter	<input type="checkbox"/>
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**Applicant Details**

SLSNZ Membership Number: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Age at October 1 2007: \_\_\_\_\_

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

Second Address (if moving prior to the season commencing):

Use after \_\_\_ / \_\_\_ / \_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Telephone      Hm: \_\_\_\_\_      Mob: \_\_\_\_\_

**Next of Kin**

Next of Kin Name: \_\_\_\_\_

Next of Kin Relation: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Patrol Uniform**

	S	M	L	XL	XXL
Patrol Shirt					
Patrol Shorts					
Rash Shirt					
Jacket					
Hat					

*The above list is an indication only. It does not guarantee supply of the above items.*

**Qualifications Held:**

	Tick	Date Awarded	
Drivers Licence (class _____)			
Surf Lifeguard Award			<i>Annually refreshed</i>
First Aid Level 1			<i>Biannually refreshed</i>
First Aid Level 2			<i>Biannually refreshed</i>
IRB Driver			<i>Annually refreshed</i>
Senior Lifeguard School			

**Describe any other relevant qualifications or achievements:**

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**Experience:**

How many years experience do you have?

	West Coast	East Coast		
Volunteer	<input type="text"/>	<input type="text"/>	Beach Ed	<input type="text"/>
Regional Guard	<input type="text"/>	<input type="text"/>	Surfcom	<input type="text"/>

**Placement:**

**1<sup>st</sup> choice**

**2<sup>nd</sup> choice**

**3<sup>rd</sup> choice**

Specific Beach:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*This is just an indication. There is no guarantee that the beaches you choose will be where you work.*

**Availability: Please confirm your employment availability below**

<b>PERIOD</b>	<b>DATES (inclusive Mon-Fri)</b>	<b>TICK</b>
Core Period <i>All applicants applying must be able to work in this period</i>	<b>19<sup>th</sup> November - 7<sup>th</sup> December 2007</b>	
	<b>11<sup>th</sup> February – 22<sup>nd</sup> February 2008</b>	
Extra weeks available	12 <sup>th</sup> November – 16 <sup>th</sup> November 2007	
	10 <sup>th</sup> December – 14 <sup>th</sup> December 2007	
	17 <sup>th</sup> December – 19 <sup>th</sup> December 2007	
	25 <sup>th</sup> February – 29 <sup>th</sup> March 2008	
	3 <sup>rd</sup> March – 7 <sup>th</sup> March 2008	
	10 <sup>th</sup> March – 14 <sup>th</sup> March 2008	
	18 <sup>th</sup> March – 20 <sup>th</sup> March 2008	

What weeks/periods within the season would you be unable to work? Why?

**Note:** Availability over the February core period is an employment requirement, unless otherwise endorsed by SLSNR management.

**Position / Role / Responsibility**

What BeachEd position/s are you interested in? (You may tick more than one box)

	<b><u>07-08</u></b>	<b><u>08-09</u></b>	<b><u>09-10</u></b>
<b>Instructor</b>			
<b>Senior Instructor</b>			

**Regional Lifeguard Service (RLS)**

Are you intending to work as a Regional Lifeguard this summer?

<b>Y / N</b>
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Keep in mind the fact that both Beach Ed and the Regional Lifeguard Service run co-currently in February and March.

If you are applying for both RLS and Beach ED which would you be your employment preference in February/March.

*Please Circle* **Regional Guard / Beach Ed**

**Employment History**

How would you rate your previous employment history as a BeachEd Instructor?

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Note: Past BeachEd employment history will be taken into account

**The BeachEd Employment Assessment**

<input type="checkbox"/>	10am Saturday September 22	Assessment- MRC	Compulsory
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**The BeachEd Employee Induction Evening**

<input type="checkbox"/>	6pm Wednesday October 17	Induction- MRC	Attend if employment gained
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Note: Attendance at the official BeachEd Employment Assessment is a compulsory requirement for employment.

**Application for alternative assessment venue**

Note: The allowance for an alternative assessment location is not guaranteed and the obligation lies with the applicant to attend a provided assessment.

Reason for inability to attend the designated assessments:

Contact person for verification:

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

Role/Relationship (lecturer, employer): \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

### **Checklist**

Have you:

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Fully completed this application form?                   |
| <input type="checkbox"/> | Fully completed the separate employment pack?            |
| <input type="checkbox"/> | Included your SLSNZ membership number?                   |
| <input type="checkbox"/> | Read and understood the attached "Information Document"? |

### **Note:**

To be employed by SLSNR you have to be a current financial member of a SLSNZ club.

Upon receiving applications this will be checked against the SLSNZ database.

### **Signature of Applicant:**

\_\_\_\_\_ Date: \_\_\_\_\_  
*In signing I acknowledge that the information in this application is accurate to the best of my knowledge*

**BEACH ED APPLICATIONS CLOSE 5PM, 21<sup>st</sup> of August 2007**

### **Return completed application:**

SLSNR, P O Box 2195 Auckland, New Zealand

☎ +64 9 303 0663 ☎ +64 9 379 6298 ✉ [experts@lifesaving.org.nz](mailto:experts@lifesaving.org.nz)

### **Privacy Act Information**

**By submitting this form you are:**

1. Consenting to Surf Life Saving Northern Region using these details for the purpose of administering the 2007/2008 Paid Programs
2. Acknowledging your right to access, and if necessary correct this information in accordance with privacy Act, 1993 and subsequent amendments.