



The life of the beach.

### POOL SWIM ASSESSMENT TEST FORM

*Note: This form can only be completed by a current SLSA Assessor, Chief Training Officer, Level 1 Swim Coach or delegate appointed by the Chief Training Officer.*

**Members Name:** \_\_\_\_\_

**Members Club:** \_\_\_\_\_

**Location that Pool Swim was conducted:** \_\_\_\_\_

*I certify that the member named above completed a pool swim (Bronze Medallion: 400m in 9mins or less, Surf Rescue Certificate: 200m in 5 mins or less) in the time detailed below.*

**Swim Time:** \_\_\_\_\_ **Distance (please tick):**  400m  200m

**Assessor / Swim Coach Name (please print):** \_\_\_\_\_

**Assessor / Swim Coach Signature:** \_\_\_\_\_

**Assessor No. / Accreditation No.:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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**Assessor No. / Accreditation No.:** \_\_\_\_\_ **Date:** \_\_\_\_\_