**AUSTSWIM practical hours application**

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| --- |
| **Personal details** |
| Name: |  | Gender: |  |
| Date of birth: |  | Age: |  |
| Address: |  |
|  |
| Phone no: |  |
| Email: |  |
| Medical conditions: |  |
| Please note as a trainee you are not insured through the Department of Education. Please contact your course provider for insurance details |
| Emergency contact name: |  |
| Emergency contact phone: |  | Relationship to you: |  |
| **Practicum information** |
| Course provider: |  | Date of course: |  |
| Preferred start date: |  |
| Preferred venues: | 1. | 2. | 3. |
| **Documentation** |
| I have attached: |
|  | A copy of my AUSTSWIM user report on successful completion of online exam |
|  | A copy of my current CPR certificate |
|  | A copy of the letter of the Department of Education screening (if 18 years or older) |
|  | A copy of my Working With Children card or receipt of application (if 18 years or older) |

Please forward copies and details to:

* Metropolitan Interm placement E: interm-metro@education.wa.edu.au
* Country Interm placement E: interm-country@education.wa.edu.au
* VacSwim placement E: vacswimstaffing@education.wa.edu.au

Please note all documents must be received at least 7 working days prior to the commencement of a program.

A confirmation email from Swimming and Water Safety must be received prior to starting a practicum.