

SWIMMING SOUTH AFRICA CHECKLIST

	Al	FILIATE			
Facilitator			Order No.		
Assessor			Course Date		
	I				
CANDITATES INFO	RMATION				
Name & Surname					
Contact Number					
Email Address					
PRE- REQUISITES	FOR ALL SSA	QUALIFICATIONS (TICE	()		
Original Enrolment Form		Original SSA Code of	Original SSA Code of Conduct		
Police Clearance less than 1		Recently Certified ID	Recently Certified ID or Passport Copy &		
year		ID photo	ID photo		
First Aid Level 1 Certificate		CPR (If First Aid is Over a Year)			
ON COURSE REQU	JIREMENTS (L	TS,TODSWIM & COACH	ING LEVEL 1)		
Lesson/Session Plans X2		Practical Assessment Rubric			
Course Evaluation Form		Practical Report			
Examination Paper		Log Sheet with 20 Hours Logged with 2			
Course Worksheet		Different Instructors/Coaches			
ADDITIONAL REQ	UIREMENTS FO	OR RECOGNITION OF P	RIOR LEARNING (RPL	-)	
Designated Workshops		Supporting Letter from	Supporting Letter from Affiliate		
Detailed CV		Lesson/Session Plan	Lesson/Session Plans		
Evidence of Teaching		Results on Hi-Tek if	Results on Hi-Tek if Coaching		
Practical Assessment		Previous Qualification	Previous Qualification/s if Available		
References		Practical Assessment			
	l.	'			
ADDITIONAL DOCUMENTS FOR RENEWAL					
Current SSA Certificate		Required Number	Required Number of CPD Points		
Designated Workshops		Detailed CV	Detailed CV		
				1	

SIGN E&T CO...... DATE......