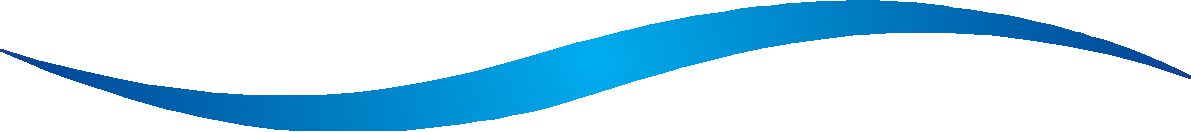
To enable the Active Swim School to register a learner for a qualification, each learner must complete and return this form before the course start date.

**PLEASE USE BLOCK CAPITALS AND ENSURE ALL INFORMATION IS ACCURATE AND LEGIBLE\*.** Once complete, please return to the Active Swim School, Les Quennevais Sports Centre, Don Farm, La Route des Quennevais, St Brelade. Payment by card or Apple pay when form is submitted.

**Course information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualification title** | **Swim England Level 2 Swimming Teacher Qualification** | | |
| **Approved**  **Training Centre** | Active Swim School  Les Quennevais Sports Centre  St Brelades  JE2 8LZ  Course Tutor:  Christina Blampied | **Course dates** | **Week 1**  Friday 5th January 2024  08.30-16.30  Saturday 6th & Sunday7thJanuary 2024 08.30-16.30  **Week 2**  Friday 12th January 2024  16.00-20.00  Saturday 13th & Sunday14th January 2024  08.30-16.30  **Week 3**  Friday 19th January 2024  16.00-20.00  Saturday 20th & Sunday21st January 2024  08.30-16.30 |

# Learner information



**Learner Registration**

|  |  |  |  |
| --- | --- | --- | --- |
| **First name\*\*** |  | **Surname\*\*** |  |
| **Maiden name**  **(if applicable)** |  | **Date of birth** |  |
| **Gender** |  | **Email address** |  |
| **Telephone number** |  | **Unique learner number (ULN)\*\*\*** |  |
| **Full address (including postcode)** |  | | |
| **Previous address (if you have moved in the last 3 years)** |  | | |
| **Emergency Contact Name & Number** |  | | |

# Ethnicity and Disability

|  |  |  |  |
| --- | --- | --- | --- |
| **Ethnicity (please enter relevant code\*\*\*\*)** |  | **Disability(please enter relevant code\*\*\*\*)** |  |

# Wavepower and Code of Ethics

I acknowledge that I have been supplied with or have access to a copy of Wavepower 2016-2019 and the Swim England Code of Ethics (both available on [www.swimming.org)](http://www.swimming.org/) and that I have fully read and understood these documents. I further acknowledge that whilst in attendance at the above course, I agree to abide by the requirements set out within both policies

# Previous qualifications

This section must be completed if pre-requisites have been identified for completion prior to registering onto this qualification. This should be verified by the course tutor during enrolment.

|  |  |  |
| --- | --- | --- |
| **Qualification title** | **Date achieved** | **Certificate number** |
|  |  |  |

# Privacy and Data Protection Statement - Data Protection (Jersey) Law 2018

As a ‘controller’ under the Data Protection (Jersey) Law 2018 we process and hold your information to perform course registration to which you are a party. We may not be able to provide you with a service unless we have enough information or your permission to use that information. Below, we explain what we collect; how we will use your information; and what your rights are. Information supplied by you on this form is required by the Active Swim School for the purpose of delivering Swim England Qualifications. Information will be accessed by sports centre staff, and we share your personal data with Swim England Qualifications and the Skills Funding Agency for Unique Learner Numbers. Your data will remain within the European Economic Area (EEA). We will not give your personal data to any other third party. We have collected your personal details, (name; address and contact details).

This may include special category data.

Your information will be used as follows:

1. To enable us to ensure that appeals to the Active Swim School regarding Swim England Qualifications are dealt with thoroughly and swiftly.
2. Personal details provided by you will be processed by the Active Swim School and will be securely disposed of after 7 years.
3. You can ask us: to stop processing your information; to correct or amend your information; for a copy of the information, we hold about you. You can also: request that the processing of your personal data is restricted; and withdraw your consent to the processing of your information. You can complain to us about the way your information is being used by contacting us at dataprotection2018@gov.je alternatively you can complain to the Information Commissioner by emailing enquiries@oicjersey.org

|  |  |  |  |
| --- | --- | --- | --- |
| **Learner signature** |  | **Date** |  |
| **Parent/Guardian signature** |  | **Date** |  |

\* If details are not legible then your registration onto the qualification may be rejected and delays in certification may occur.

\*\*Your certificate will be printed as entered on the learner registration form, any errors will be resolved at the cost of the individual and not the Active Swim School.

\*\*\* The Active Swim School can provide you with this information upon request

\*\*\*\* Ethnicity and Disability codes can be found on page 4

# Topics Covered

The Active Swim School request that all learners read Swim England Qualifications course syllabus prior to the start of the course. This can be found on the Swim England Qualifications website using the following link [www.swimenglandqualifications.com](http://www.swimenglandqualifications.com/)

* PowerPoint Presentations • Flip Chart Exercises
* Guided Group Discussions
* Guided Group Activities
* Practical Demonstrations
* Poolside practical sessions focusing on the Fundamentals and core aquatic skills

**You are required to bring the following items to the course:**

* Photographic Identification (must be shown to the Approved Centre Key Contact on the first day of the course). Acceptable forms of ID include Passport, Driving License, Birth Certificate and ID Card
* A whistle
* Swimming costume/Towel
* Rash vest to be worn in the water when assisting a swimming lesson
* Pen / pencil/ notebook for personal note taking although handouts will be provided to support topics

Water work will be included on more than one occasion each of the days so candidates may prefer to bring two sets of towels,swimsuits, shorts, and t-shirts.

**Course Assessment:**

The qualification is made up of **l**earning outcomes. Assessment is through the completion of a series of tasks **detailed by Swim England Qualifications.** To achieve this qualification learners must meet all the learning outcomes. **Learning outcomes must be achieved by:**

* Observation record
* Review Record
* Theoretical questions, which will change during the life of the qualification

Once you have successfully completed the course, results can take up to 12 weeks to be processed.

Certificates will then be sent out to your preferred postal address as stated on your booking details. If you have any questions prior to the start of the course, please feel free to contact your course tutor using the details below.

|  |  |
| --- | --- |
| **Course Educator** |  |
| **Telephone Number** |  |

# Ethnicity Codes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Code** |  | **Description** | **Code** |
| Not Supplied | 99 | Mixed - White & Black African | 20 |
| White - British | 23 |  | Chinese | 18 |
| White - Irish | 24 | Asian or Asian British - Indian | 12 |
| White - Other | 25 | Asian or Asian British - Pakistani | 13 |
| Mixed - White & Black Caribbean | 21 | Asian or Asian Bangladeshi | 11 |
| Mixed - Other | 22 | Asian or Asian British - Other Asian background | 14 |
| Black or Black British - African | 15 | Mixed - White & Asian | 19 |
| Black or Black British - Caribbean | 16 |  | Prefer not to say | 97 |
| Black or Black British - Other | 17 |

# Disability Codes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Code** |  | **Description** | **Code** |
| None | None |  | Mental ill health | 7 |
| Visual impairment | 1 | Temporary disability after illness | 8 |
| Hearing impairment | 2 | Profound complex disabilities | 9 |
| Disability affecting mobility | 3 | Multiple disabilities | 90 |
| Other physical disability | 4 |  | Other \* | 97 |
| Asthma/epilepsy/diabetes | 5 | No learning difficulty | 98 |
| Emotional behaviour difficulties | 6 | Not known/information not provided | 99 |

**\***Please provide Specific Learning Disability using the list below

**Specific Learning Difficulty** (only use the codes below if you have selected “other” above

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Code** |  | **Description** | **Code** |
| Moderate Learning Difficulty | 97-1 | Specific Language impairment | 97-94 |
| Severe Learning Difficulty | 97-2 | Asperger’s/autism | 97-95 |
| Dyslexia | 97-10 | ADD/ADHD | 97-96 |
| Dyscalculia | 97-11 | Other | 97-97 |
| Other specific learning difficulties | 97-19 |  | No learning difficulty | 97-98 |
| Multiple learning disabilities | 97-90 | Not known/ information not provided | 97-99 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualification title** | **SEQ Level 2 Swimming Teacher Qualification** | | |
| **Course dates** | **Week 1**  Friday 5th January 2024  Saturday 6th & Sunday7thJanuary 2024  **Week 2**  Friday 12th January 2024  Saturday 13th & Sunday14th January 2024  **Week 3**  Friday 19th January 2024  Saturday 20th & Sunday21st January 2024 | **Course times** | 08.30-16.30  08.30-16.30  16.00-20.00  08.30-16.30  16.00-20.00  08.30-16.30 |
| **Course Fee** | £815.70 | **Payment method** | By Card or phone payable at the centre or by telephone transaction on 01534 449877 |