

# Swim Teacher NZRRP

## Re-registration Form



TE  
MAHI  
AKO



Complete this form to re-register on the New Zealand Register of Recreation Professionals (NZRRP).

Once completed, please scan or send this form to Skills Active.

Email: [info@skillsactive.org.nz](mailto:info@skillsactive.org.nz), or post: Skills Active, PO Box 2183, Wellington 6140.

**A re-registration fee of \$25 + GST (\$28.75 including GST)**

### 1. Applicant to complete this section

#### A. Applicant details

First names

Last name

Date of birth

National Student Number  
(if known)

Email address

Workplace

Phone

#### B. Qualification

Please tick the qualification you currently hold

☐ New Zealand Certificate in Aquatics (Swim and Water Safety Teacher) Level 3

#### C. Professional development

List and **attach** evidence of a minimum of **10 hours** of professional development in previous 3 years.

You can upload these details into an Active CV logbook ([www.activecv.org.nz](http://www.activecv.org.nz)) or create your own logbook and attach a copy of that.

Date	PD Activity/Event	Comments	Hours
------	-------------------	----------	-------

#### D. Instruction experience

List and **attach** evidence of a minimum of **40 hours** of paid or voluntary work experience as a swim instructor in previous 3 years.

You can upload these details into an Active CV logbook or create your own logbook and attach a copy.

Date	Work Experience	Role	Comments	Hours

#### E. First Aid

**First Aid Certificate expiry date**

#### F. Applicant declaration

In signing this form I agree:

- to work to the *Code of Ethical Practice for Recreation Professionals* (available on [www.activecv.co.nz](http://www.activecv.co.nz)); and
- that I have disclosed to my employer any history of fraud, dishonesty or criminal activity that would cause doubt over my fitness or ability to act in this role; and
- I have the literacy and numeracy skills to allow me to fulfil this role; and
- I am legally able to work in New Zealand.
- By signing here you acknowledge that the information supplied is correct to the best of your knowledge. You have read and agree to the terms and responsibilities listed, and to the terms and conditions of trade, available on the Skills Active website.

**Applicant signature**

**Date**

## 2. Attestor to complete this section

This attestation may be completed by an Employer, Supervisor or Skills Active Swim Teacher Assessor.

### Guidance for Attestors

A person seeking or holding the status of a Registered Recreation Professional on NZRRP must be, and remain during the period of registration, a **fit and proper person**.

To maintain this standard Skills Active requires each Registered Individual to:

- Be ethical and behave in an appropriate way, and
- Be mindful of their influence on safety, and
- Not bring Skills Active or the standards it administers into disrepute, and
- Be able to read, understand and query technical information related to the role they are appointed to, and
- Be legally permitted to work in New Zealand.

### Attestation

I attest that the Qualification holder named above:

- Has met re-registration requirements
- Is current in knowledge, skills and experience
- Is a fit and proper person (see definition above)
- Has been police vetted within last 12 months.

**Attestor Name**

**Attestor Signature**

**Position**

**Phone**

**Email**

**Re-registration date**

## 3. Payment Options

Re-registrations can be paid for by credit card or direct credit.

Purchase order number

Invoice workplace

## Final check

Trainee completed section 1

PLPC Assessor completed section 2

Attestor completed section 3

## Office use only

	Accuracy and signatures checked
	Payment option selected
	DC to check assessor has PLPC scope

Notes: