



Safety Training Awards

The Awarding Body of the STA



Course Application Form (1) – Certification & Re-Validation Courses

Please complete using block capitals

| | | | | | | | | |
|---|--|---|----------------------------------|---------------------------|---------------|-----------------------|------------------|----------|
| Course and Venue Details | | (See overleaf for codes) | Certification | | Re-Validation | | Additional Units | |
| Type of Course | | | Ongoing | Conversion | Update | Delete As Appropriate | | |
| Course start date _____ | | No of sessions _____ | | Total contact hours _____ | | | | |
| Theory Examination Date _____ | | | Practical Examination Date _____ | | | | | |
| For a NaRS (PL) and NaRS (PA) is a Spinal Unit to be included? (mandatory when board available) | | | | | | | | YES / NO |
| Course Organiser | | | | Course Venue | | | | |
| Name _____ | | | | | | | | |
| Address _____ | | | | | | | | |
| _____ | | | | | | | | |
| _____ | | | | | | | | |
| Post Code _____ | | | | | | | | |
| Telephone _____ | | | | | | | | |
| Despatch Manuals to: | | | | Send Invoice to: | | | | |
| Name _____ | | | | | | | | |
| Address _____ | | | | | | | | |
| _____ | | | | | | | | |
| _____ | | | | | | | | |
| Post Code _____ | | | | | | | | |
| No of Portfolios*/Manuals held _____ | | Purchase Order No _____ | | | | | | |
| From course Ref: _____ | | Note: The Course Organiser is responsible for paying the Registration Fees to the STA. If a third party is to be invoiced the official purchase order must be attached. | | | | | | |
| No of Portfolios* required _____ | | * Only applicable to STC (F), STC(ST) Courses | | | | | | |
| No of Swim Books* required @ £20 each _____ | | | | | | | | |
| The Course Tutor and Examiners will be: (the Tutor & Examiners must be on the STA approved list). | | | | | | | | |
| Tutor Name & Address _____ | | | | | | | | |
| (if different to Organiser) _____ | | | | | | | | |
| _____ | | | | | | | | |
| Daytime Telephone No. _____ | | Membership No. _____ | | | | | | |
| Examiner _____ | | Membership No. _____ | | | _____ | | | |
| Examiner _____ | | Membership No. _____ | | | _____ | | | |
| Examiner _____ | | Membership No. _____ | | | _____ | | | |
| Invigilator* _____ | | Membership No. _____ | | | _____ | | | |

I confirm that the facilities I am using to run the above course fully comply with the requirements of the Health & Safety at Work Act and the Equal Opportunities Act. If you do not wish to advertise on www.sta.co.uk tick here.

I anticipate that there will be _____ candidates on the course and I confirm that immediately after the course starts I will return to the STA:

- STA Candidate Application Forms, fully completed and signed, for ALL candidates.
- Start of Course Declaration / CREGG Form together with STA Registration Fees for ALL candidates.
- All training manuals received by me that are in excess of the number of candidates finally registered.

Signed: _____ Date: _____

Course Organisers must also submit a course timetable with this Application Form

| | |
|---|---------------|
| If this form is not received by the STA AT LEAST 28 DAYS before the starting date for the course we cannot guarantee delivery of manuals | Course Ref No |
|---|---------------|

Fees payable for courses starting after 1st January 2008

| Qualification Title | Fees Payable to STA £ | | | Min Age | Mem Req'd | Max No of Candi- |
|---------------------|-----------------------|------|--------|---------|-----------|------------------|
| | Acronym | Exam | Re-Val | | | |



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| Swimming & Aquatic Courses | | | | | | |
|---|-----------------|--------|----------------|-------|-----|----|
| Student Teachers Certificate | SME | 12.00 | N/A | 13 | No | 16 |
| Swimming Teachers Certificate – Beginners | STC B | 48.00 | 13.00 | 16 | Yes | 16 |
| Swimming Teachers Certificate – Full | STC F | 33.00 | 13.00 | 18 | Yes | 16 |
| Teaching Swimming – Primary School Teacher | STC PT | 48.00 | 13.00 | 18 | No | 16 |
| Teaching Swimming – Secondary School Teacher | STC ST | 33.00 | 13.00 | 18 | No | 16 |
| School Teachers Basic Certificate | STBSC | 48.00 | 13.00 | 18 | No | 16 |
| Aquatic Teaching – Aquacise | ATA | 53.00 | 13.00 | 18 | Yes | 16 |
| Aquatic Teaching – Baby & Pre School | BPC | 43.00 | 13.00 | 18 | Yes | 16 |
| Aquatic Teaching – Special Needs Teacher | SNC(T) | 33.00 | 13.00 | 18 | Yes | 16 |
| Aquatic Teaching – Special Needs Asst | SNC | 33.00 | 13.00 | 16 | Yes | 16 |
| Lifesaving & First Aid Courses | | | | | | |
| NaRS Pool Lifeguard | PL | 34.00 | 18.00 | 16 | No | 12 |
| NaRS Pool Attendant | PAL3 | 22.00 | 16.00 | 16 | No | 12 |
| NaRS Poolside Helper | Member Other | NaR PH | 16.00 12.00 | 10.00 | No | 16 |
| NaRS Pool Rescue Additional Units | PRADD | 16.00 | 16.00 | 16 | No | 12 |
| NaRS Pool Safety Award | SAT | 16.00 | 16.00 | 16 | No | 16 |
| NaRS First Aid at Work | FAW | 27.00 | 27.00 | 16 | No | 12 |
| NaRS FAW Appointed Person | FAWAP | 16.00 | 16.00 | 16 | No | 16 |
| NaRS FAW Additional Units | FAWAD | 16.00 | 16.00 | 16 | No | 16 |
| NaRS Emergency Responder | ER | 16.00 | 16.00 | 16 | No | 12 |
| NaRS Emergency Responder Plus (combined) | ER+ | 22.00 | 22.00 | 16 | No | 12 |
| NaRS Immediate Aid | IA | 16.00 | 16.00 | 16 | No | 16 |
| NaRS Paediatric First Aid Foundation | PFAF | 16.00 | 16.00 | 14 | No | 12 |
| NaRS Paediatric First Aid Qualification | PFAQ | 16.00 | 16.00 | 16 | No | 12 |
| NaRS Cricket Coach FAW App Person | CCFAAP | 16.00 | 16.00 | 16 | No | 20 |
| NaRS Golf FAW Appointed Person | GCFAAP | 16.00 | 16.00 | 16 | No | 16 |
| NaRS Martial Arts FAW Appointed Person | MAFAAP | 16.00 | 16.00 | 16 | No | 16 |
| NaRS Ice Skating FAW Appointed Person | ISFAAP | 16.00 | 16.00 | 16 | No | 16 |
| Manual Handling | MH | 16.00 | 16.00 | 16 | No | 12 |
| Bag-Valve-Mask Module | NARSBVM | 16.00 | N/A | 16 | No | 16 |
| Pool Plant Operators Courses | | | | | | |
| Foundation Cert in Swimming Pool & Spa Water Treatment | PPOF | 43.00 | 13.00 | 16 | No | 16 |
| Cert in Swimming Pool & Spa Water Treatment Technical Ops | PPOTO | 43.00 | 13.00 | 18 | No | 16 |
| Tutor Courses | | | | | | |
| NaRS Teacher/Examiner | NT/E | 39.00 | N/A | 18 | Yes | 12 |
| NaRS FAW Teacher/Examiner | FT/E | 35.00 | N/A | 18 | Yes | 12 |
| NaRS Advanced Resus Teacher/Examiner | ADVRESUS | 16.00 | N/A | 18 | Yes | 12 |
| Adrenaline Auto-Injection Tutor Module | AAITUTOR | 16.00 | N/A | 18 | Yes | 16 |
| Spinal Teacher/Examiner | SP T/E | 16.00 | N/A | 18 | Yes | 12 |
| Customer Care Tutor Module | CC Tutor | 35.00 | N/A | 18 | Yes | 12 |
| Bag Valve Tutor Module | BVM Tutor | 16.00 | N/A | 18 | Yes | 16 |
| Swimming Tutor Module | Swim Tutor | 40.00 | N/A | 21 | Yes | 12 |
| Manual Handling Teacher/Examiner | MH TE | 38.00 | N/A | 18 | Yes | 12 |

*Please note: All Examination Re-takes are charged at £13 per re-take

Address for correspondence: The Swimming Teachers' Association, Anchor House, Birch Street, Walsall, West Midlands. WS2 8HZ. Phone: 01922 645097/Fax: 01922 720628