Calgary Board of Education

Swimming Ability Form

Off-Site Activities

Parents/guardians: Please complete the following information regarding the swimming ability of your child and return it to the Teacher-in-Charge. CBE staff and the Service Provider will use this information to best ensure the safety of the students during the program. CBE policy states that swimming is only allowed in a lifeguard supervised pool or beach.

Student Name: _____ **Age:** _____ **Home Room #:** _____

School: _____ **Teacher:** _____

Comfort level around the water: ☐ Not comfortable ☐ Comfortable ☐ Very comfortable

Swimming Ability

- ☐ **Non-swimmer** – Cannot support themselves in deep water
- ☐ **Novice** – Can support themselves in deep water and is capable of moving short distances (less than 5 meters)
- ☐ **Intermediate** – Can support themselves in deep water for several minutes and can swim a length of the pool
- ☐ **Advanced** – Can support themselves in the water and swim many lengths of the pool

Select the highest level of formal swim training your child has completed:

☐ **Lifesaving Society – Swim for Life**

☐ Preschool 1 ☐ Preschool 2 ☐ Preschool 3 ☐ Preschool 4 ☐ Preschool 5

☐ Swimmer 1 ☐ Swimmer 2 ☐ Swimmer 2 ☐ Swimmer 4 ☐ Swimmer 5 ☐ Swimmer 6

☐ **YMCA – Li'l Dippers, Learn to Swim and Star Program**

☐ Bobbers ☐ Floaters ☐ Gliders ☐ Divers ☐ Surfers ☐ Dippers

☐ Level 1 – Otter ☐ Level 2 – Seal ☐ Level 3 – Dolphin ☐ Level 4 – Swimmer

☐ Star 1 ☐ Star 2 ☐ Star 3 ☐ Star 4 ☐ Star 5 ☐ Star 6 ☐ Star 7

☐ **Red Cross or other swim program name and level completed:** _____

☐ **I am unsure of the last swim level my child has completed.**

☐ **My child has never taken swim lessons before.**

Comments/other information about this activity that would be important for the Teacher-in-Charge and/or Service Provider (swimming instructor) to know (please use the back of this page for more space if necessary):

Name of Parent/Guardian: _____
(Please print)

Signature of Parent/Guardian: _____ **Date:** _____
(YYYY/MM/DD)

Personal information is collected under the authority of Alberta's *Protection of Privacy Act* (POPA) and the *Education Act*. This information will be used to respond to the identified medical or physical needs of the student named above, and to see if the candidate(s) meet the criteria and will be treated in accordance with the privacy protection provisions of POPA. If you have any questions about the collection, please contact your School Principal.