

## Application for Revalidating an STA Aquatic Teaching Qualification

STA will issue a letter confirming revalidation of an aquatic teaching qualification.

Aquatic teachers must demonstrate and provide evidence of maintaining occupational competency by providing evidence of teaching hours and attendance at CPD events or online completion of CPD's.

Personal Details									
Mr / Mrs / Mis	s / Ms	Surname: First			First Name:				
Address:									
Postcode:		Telephone Number:							
Email:									
Original Qualification Details									
Qualification	Title:	ïtle:							
Membership Number:		Date Issued:							
To receive a letter of confirmation, aquatic teachers must provide evidence of:									
<ol> <li>Practical teaching experience in the discipline being revalidated. A minimum of 100 teaching hours within the last 5 years are required</li> <li>Attending approved online or face to face seminars or events equating to a minimum of 1 CPD point.</li> <li>Please note: Seminars, CPD's and practical teaching hours must be relevant to the discipline being revalidated.</li> </ol>									
Notes									
STA recommends all aquatic teachers meet and follow best practice guidelines and recommendations to ensure they are compliant with their insurance. All guidelines and policies can be found in the STA Swimming Teaching Code of Practice. For further information please visit www.sta.co.uk									
Payment									
I confirm I have enclosed a cheque for £5.00 (payable to STA).									
OR									
I give permission for STA to contact me for the relevant credit / debit card details.									
Acknowledgement									
l cor	I confirm I have enclosed copies of the relevant seminar and or CPD certificates.								
Signature:					Date:				

## Witness Testimony

Details										
Name:										
Witness Name:										
Relationship:										
Notes										
The witness testimony should also include the following relevant information:										
<ul><li>Dates</li><li>Duration of le</li><li>Venue/s</li></ul>	essons •	specific	participant	ants ts, must be discipline f the teaching ability						
Statement										
Acknowledgement										
Witness Signature:			Date:							