



LIFESAVING SOCIETY
The Lifeguarding Experts

**National Lifeguard:
Pool** (Revised 2004)

Side 1: Please **print** each candidate's name and contact information legibly.

Date of birth	Prerequisites checked	Core										Pool Option							Result	
		Lifeguarding theory and practice	Lifeguard communication	Lifeguard communication	Management of drowning victim	Management of submerged victim	Management of spinal-injured victim	Supervision: victim recognition	Pool analysis	Supervision: scanning & observation	Supervision: positioning & rotation	Entries and removals	Specialized techniques	Pool search: missing person	Physical standard: spinal carry	Physical standard: object recovery	Physical standard: approach & carry	Physical standard: rescue drill		Pool lifeguarding situations
		*1	*2a	*2b	*3a	*3b	*3c	*4	*1	*2a	*2b	*3	*4	*5	*6a	*6b	*6c	*6d		7
* Items are instructor evaluated																				
1	Name	Year																		
	Address	Month	Prereq: Original: Bronze Cross		Date earned: _____		Location: _____													
	City	Day	Standard 1st Aid		Date earned: _____		Location: _____													
	Postal Code		Recert: NLS		Date earned: _____		Location: _____													
	E-mail	Phone																		
2	Name	Year																		
	Address	Month	Prereq: Original: Bronze Cross		Date earned: _____		Location: _____													
	City	Day	Standard 1st Aid		Date earned: _____		Location: _____													
	Postal Code		Recert: NLS		Date earned: _____		Location: _____													
	E-mail	Phone																		
3	Name	Year																		
	Address	Month	Prereq: Original: Bronze Cross		Date earned: _____		Location: _____													
	City	Day	Standard 1st Aid		Date earned: _____		Location: _____													
	Postal Code		Recert: NLS		Date earned: _____		Location: _____													
	E-mail	Phone																		
4	Name	Year																		
	Address	Month	Prereq: Original: Bronze Cross		Date earned: _____		Location: _____													
	City	Day	Standard 1st Aid		Date earned: _____		Location: _____													
	Postal Code		Recert: NLS		Date earned: _____		Location: _____													
	E-mail	Phone																		
5	Name	Year																		
	Address	Month	Prereq: Original: Bronze Cross		Date earned: _____		Location: _____													
	City	Day	Standard 1st Aid		Date earned: _____		Location: _____													
	Postal Code		Recert: NLS		Date earned: _____		Location: _____													
	E-mail	Phone																		
6	Name	Year																		
	Address	Month	Prereq: Original: Bronze Cross		Date earned: _____		Location: _____													
	City	Day	Standard 1st Aid		Date earned: _____		Location: _____													
	Postal Code		Recert: NLS		Date earned: _____		Location: _____													
	E-mail	Phone																		

Check box if there are more candidates on the reverse side of this page. - Satisfactory Performance **F** - Fail **Total Pass for Exam** **Total Fail for Exam**

This test sheet is Page _____ of _____ Pages.

Instructor information Instructor's name _____ ID# _____ E-mail address (_____) _____ Telephone _____ Signature _____	Exam information Exam date: _____ Exam is: YY MM DD <input type="checkbox"/> Original OR <input type="checkbox"/> Recert Facility name (e.g., name of pool) _____ Telephone _____
Awards information <input type="checkbox"/> Awards issued by affiliate <input type="checkbox"/> Awards not issued Payment information <input type="checkbox"/> Exam fees attached <input type="checkbox"/> Exam fees not attached Send invoice or receipt to: _____ (_____) _____ Host name (Affiliate) _____ Telephone _____ Street address _____ City _____ Prov. _____ Postal code _____	This section to be completed by the NLS Examiner who examined the candidates. Examiner's name _____ ID# _____ E-mail address _____ (_____) _____ Telephone _____ Signature _____



LIFESAVING SOCIETY
The Lifeguarding Experts

**National Lifeguard:
Pool** (Revised 2004)

Side 2: Please **print** each candidate's name and contact information legibly.

Date of birth

Prerequisites checked

Core

Pool Option

Lifeguarding theory and practice	Lifeguard communication	Lifeguard communication	Management of drowning victim	Management of submerged victim	Management of spinal-injured victim	Supervision: victim recognition	Pool analysis	Supervision: scanning & observation	Supervision: positioning & rotation	Entries and removals	Specialized techniques	Pool search: missing person	Physical standard: spinal carry	Physical standard: object recovery	Physical standard: approach & carry	Physical standard: rescue drill	Pool lifeguarding situations
*1	*2a	*2b	*3a	*3b	*3c	*4	*1	*2a	*2b	*3	*4	*5	*6a	*6b	*6c	*6d	7

* Items are instructor evaluated

7																			
Name.....		Year																	
Address.....																			
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Address.....																			
City.....	Postal Code.....	Month	Prereq.: Original: Bronze Cross		Date earned: _____	Location: _____													
		Day	Standard 1st Aid		Date earned: _____	Location: _____													
E-mail.....	Phone.....		Recert: NLS		Date earned: _____	Location: _____													

Check box if there are more candidates on the reverse side of this page. - Satisfactory Performance **F** - Fail Total Pass for Exam Total Fail for Exam

This test sheet is Page _____ of _____ Pages.

Host name (Affiliate) _____ Telephone _____ Please complete Instructor, Awards and Payment information sections on Side 1 of test sheet. Host name, Exam information and Examiner sections must be completed on both sides 1 and 2 of the test sheet.	Exam information Exam date: _____ Exam is: YY MM DD <input type="checkbox"/> Original OR <input type="checkbox"/> Recert Facility name (e.g., name of pool) _____ Telephone _____
	This section to be completed by the NLS Examiner who examined the candidates. Examiner's name _____ ID# _____ E-mail address _____ Telephone _____ Signature _____