

**CITY OF LOS ANGELES
DEPARTMENT OF RECREATION AND PARKS
CITYWIDE AQUATICS DIVISION**

OPEN WATER LIFEGUARD I
(Code No. 2420-1)
1000 Meter Swim Certificate

COMPLETED SWIM CERTIFICATE MUST BE ATTACHED TO EMPLOYMENT
APPLICATION

Candidate Name: _____

Address: _____

City: _____ State: _____ Zip: _____

**Information below must be completed by a Facility Manager, Lifeguard,
or Coach**

This portion to be completed by aquatic professional observing the swim

I observed _____ complete a **1000 meter** pool
(candidate's name)

swim on _____ at _____
(date) (location of swim)

The swim was completed in _____ minutes and _____ seconds.

Aquatic professional name (print) _____

Signature _____

Position title _____

Address of swim location _____

City _____ State _____ Zip _____

Phone _____ Best time to call to verify _____