



Region of Queens Municipality
Recreation Department
2026 Application for Aquatic Employment

Name: _____

Mailing Address: _____

Telephone: _____

Email: _____

Preferred Communication Method: _____ **Phone** _____ **Email** _____ **Text**

Please indicate the position(s) you are applying for:

North Queens Aquatic Centre

___ Swim Instructor & Lifeguard (2 positions)

South Queens Outdoor Pool (Stay Tuned for the Official Name)

___ Swim Instructor (full-time, part-time and casual positions available)

I am interested in:

_____ full-time _____ part-time _____ casual

___ Lifeguard (full-time, part-time and casual positions)

I am interested in:

_____ full-time _____ part-time _____ casual

When will you be available to start work? Date: _____

Are you available to work after August 31/26? Yes _____ No _____

If you are available after August 31/26, when would you be available to work?

All aquatic positions are seasonal in nature. Vacation pay is paid out in addition to the hourly rate of pay, which means there is no paid time off included during the term of employment. Any approved time off requests during the term of employment are without pay and based on the availability of other certified staff to provide the required supervision. If no certified staff are available to cover time off requests to ensure the pool remains operational, time off requests will not be approved.

Do you know of any days during July and August that you would be requesting more than two days off in a row? (list dates) _____

If you were offered a position and it required you to work between North Queens Aquatic Centre and South Queens Outdoor Pool, is that something you would agree to?

_____ Yes _____ No

Work History (start with most recent)

Job Title: _____

Name of Organization: _____

Name of Immediate Supervisor & Position: _____

Telephone Number: _____

From (month/year):_____ To (month/year):_____

Job Title: _____

Name of Organization: _____

Name of Immediate Supervisor & Position:_____

Telephone Number: _____

From (month/year):_____ To (month/year):_____

Aquatic Certifications

Note: Proof of Certifications Required – Applications WILL NOT be processed without the following proof of certification information (ie. submit copies of certification cards).

I am currently National Lifeguard (NL) – Pool, Swim for Life Instructor and Intermediate First Aid/CPR C & AED certified up to and including October 15, 2026.

I am not and will not be fully certified as National Lifeguard (NL) – Pool, Swim for Life Instructor and/or Intermediate First Aid/CPR C & AED up to and including October 15, 2026. Certification(s) I will not hold, or that expire, during this timeframe, include (please list with course names and expiry dates where applicable):

NS Lifesaving Society: Swim for Life Instructor

Date Issued: _____

Expiry Date: _____

Course/Exam Date: (if not certified) _____

Recert Date: (if applicable prior to Oct. 15/26) _____

Member Number: _____

NS Lifesaving Society: National Lifeguard (NL) – Pool Option

Certification Date: _____

Course/Exam Date: (if not certified) _____

Recert Date: (if applicable prior to Oct. 15/26) _____

Member Number: _____

First Aid, CPR & AED Certification

First Aid/CPR Level: _____

Certification Date: _____

Recert Date: (if applicable prior to Oct. 15/26) _____

NS Lifesaving Society - Bronze Cross

Certification Date: _____

Member Number: _____

Other Relevant Certifications (ie. Lifesaving Instructor, NLS/SFA Instructor, AquaFit Instructor, WHMIS, First Aid Instructor, Examiner, NL – Waterfront, NL – Surf, etc.)

Certification: _____

Certification Date: _____

Would you be willing to obtain additional aquatic certifications?

Please list the certifications you would be interested in obtaining if available:

Please Note:

Proof of Certifications Required – Applications WILL NOT be processed without proof of current certification information (ie. copies of certification cards). Holding and maintaining current certification is the responsibility of the applicant; including obtaining recertification courses required for employment.

If you are hired for seasonal aquatic employment, what size clothing would you need? (ie. XS, S, M, L, XL, XXL)

_____ Tank Top _____ UV Protectant Long Sleeve Shirt _____ Hoodie

References

Please name two persons who know of your work and who we may contact (no relatives):

Name: _____

Occupation: _____

Organization: _____

Telephone: _____

How many years have you known this person? _____

In what capacity do you know them? _____

Name: _____

Occupation: _____

Organization: _____

Telephone: _____

How many years have you known this person? _____

In what capacity do you know them? _____

I hereby certify that the foregoing information is true and complete to the best of my knowledge. I understand that a false statement may disqualify me from employment or cause my dismissal.

Signature

Date

Submit completed application forms to:

Option 1: Email: jobs@regionofqueens.com with subject line "Aquatic Employment"

Option 2: In Person: Queens Place Emera Centre, 50 Queens Place Drive Liverpool, N.S. in an envelope marked with "Aquatic Employment" c/o Pyper Wilms

Deadline to apply: June 19, 2026