



LIFEGUARD CODE OF ETHICS

As a certified lifeguard, I will perform my work in a manner:

- Free of bias with regard to religion, ethnicity, gender, age, national origin, and disability
- Place the safety and welfare of public, workers associated with facility operation above all other considerations
- Protect nearby general public property and the environment
- Make my management aware if I have safety concerns relating to the life guarding operations that I am performing or witnessed any violation that might affect the safety of the swimmers.
- Not violating safety-related regulations, warnings, or instructions set forth by DM, recognized safety standards.
- Not misrepresenting or deceiving others concerning my experience or the capabilities of myself or the area I am working in.
- Not misrepresent or misuse my certification card or the organization logo, both of which are the property of **Safety Skills Training DMCC**; and I understand that I must return the card to **Safety Skills Training DMCC** immediately if required to do so.
- Not performing additional duties while assigned the duty of swimmer protection

LIFEGUARDS-SUBSTANCE ABUSE GUIDELINES OF DUBAI MUNICIPALITY

- It is the policy of Dubai Municipality that Lifeguards shall not use prescribed or over-the counter substances that would impair their ability to perform their duties safely.
- This includes illegal drugs, controlled substances (including trace amounts), look-alike drugs, designer drugs, or any other substance that may have an effect on the human body of being a narcotic, depressant, stimulant, or hallucinogen.
- An exception to this rule is that a Lifeguard may use such a substance or drug if a licensed medical practitioner who is familiar with the Lifeguard medical history and all assigned duties, and who has advised the Lifeguard the prescribed substance prescribes it will not adversely affect his ability to carry on his duties safely.

DISCIPLINARY POLICY

Grounds for revocation of certification status shall include, but not be limited to, the following:

- Period of certification exceeded without renewal
- Evidence of falsification of any information on any documents submitted to **Safety Skills Training DMCC** or its agents
- Evidence of non-compliance with PHSD-DM Substance Abuse Policy
- Evidence of culpability in an accident during certification period
- Evidence of non-compliance with medical requirements
- Evidence of non-compliance with the Code of Ethics

Name of certified person: _____

Company/ Organization: _____

Date of Certification: _____

Signature of certified person: _____ Date: _____