LIFEGUARD EVALUATION REPORT Mid-Season

NAME: Reyra M		Facility: Six ON	Nocok	
(Last) (First)		(Middle)		
PERFORMANCE INDICATORS: S = Satisfactory I = Improvement needed U = Unsatisfactory				
PERFORMANCE FACTORS to evaluate a	ii iiiegu	laius		
Did this Lifeguard:	Rate	Did this Lifeguard:	Rate	
1. Promptly report for duty (on time)?	5	8. Demonstrate competency in water	5	
(Not excessively absent)		safety skills?		
2. Obeys workplace rules and regulations?	S	9. Demonstrate competency in first aid Skills?	5	
3. Perform assigned duties?	5	10. Demonstrate knowledge of lifeguard	5	
Participates in in-service and meetings		principles and techniques?	-3	
4. Wears uniform properly and appropriately?	5	11. Demonstrate competency in swimming and endurance skills?	5	
5. Initiative Ability to act on his/her own and take the lead.	5	12. Communicate with the public with tactful yet positive results?	5	
6. Cooperate with fellow staff?	5	13. Accept authority and responsibility?	5	
7. Physical Condition: Commensurate to the job?	5	14. Adequately handle emergencies? (Shows good judgement)	5	
For ALL LINSATISFACTORY explanation mu	ist be gi	ven.		
CAPTAIN/LIEUTENANT COMMEN COUPLE GEORGE 1 COUPLE GEORGE 1 CO	ITS:	A great guard, in See as a Tutura Ct.		
orly no	eds	to Learn or pratice engaging rookies & to	icichiy	
Daniel Silva		L+ M-25	of our A.C.	
Signature of evaluator		Title of evaluator Date	Greatin	
EMPLOYEE REMARKS:		Derver a little respectioned to pro-		
		7/25		

Signature of employee Signature acknowledges that this evaluation was seen by the Lifeguard but does not mean the Lifeguard agrees with this evaluation. If additional space is needed for remarks, please use additional sheets which should be signed by all parties.

Date

Lifeguard Warning Notice – 2019

The following warning was issued today and it is to be made part of the official record.

Name Recyca	8-1-2019 Date
 () Unreported absence () Tardiness () Drinking on duty () Reporting under the influence () Insubordination () Dishonesty () Failure to obey orders 	 () Fighting on premises () Leaving without permission () Improper conduct (×) Violation of rules () Defective or improper work () Careless () Destruction of property () Other:
REMARKS:	ade Violation
No C	Bi in Deepend nile Swimming
Use reverse side if necessary	Signature of Supervisor
I have read this report:	Signature of Employee
The warning has been noted and is made as of this date:	part of the above employee's record, S-1-2019 Date
WARNING (1) 2 3	

WESTCHESTER COUNTY

LIFEGUARD EVALUATION End of Season

Rate

A

PA

NAME: M Reyna	Reyna Facility: Saxon		
PERFORMANCE INDICATORS: A= Always S= Sometimes N = Never			
PERFORMANCE FACTORS			
	Rate		
Promptly report for duty (on time) (Not excessively absent or late)	A	8 Has a positive attitude	
2. Obeys workplace rules and regulations	l A	9 Worked well with other lifeguards on the team	
3. Perform assigned duties	A	10. Adequately handle emergencies (Shows good judgement)	
4. Wears uniform properly and appropriately	A	11. Accept authority and responsibility	
5. Initiative Ability to act on his/her own and take the lead.	A	12. Communicate with the public with tactful yet positive results	
6. Respectful to fellow staff and officers	n	13. Know where all of the equipment is (first aid book certification binder, binder with all of the incident reports and daily logs).	
7. know all of the whistle drills	A	14. Participate in in- service trainings	
Number of write ups? Zero Years worked? 4 Vacations taken? Zero Number of saves? Zero		Last day of work: Aug 20 Number of call outs or lateness? 78 ro How many? Zero Was this person every sent to other facilities? Yes	
Rehire: YES Why:			
Is this person eligible for a pay increase? Yes			
Should this person be considered for a promotion ne	xt season?	? VPS	
Lieutenants Comments: 15 the pleasure of working with. She desar would make a considered.	phen	Lieutenant I've had the so a great lieutenant and goord, command captain and should be	
Captain's comments:			

Employee Comments:			
MINI 3/1) Signature of evaluator	Captain Title of evaluator	8/31/21 Date	
Signature of evaluator	Title of evaluator	Date	
Signature of evaluator	Title of evaluator	Date	
Pa			
Signature of employee			Date

Signature acknowledges that this evaluation was seen by the Lifeguard but does not mean the Lifeguard agrees with this evaluation.

If additional space is needed for remarks, please use additional sheets which should be signed by all parties.

A copy of any evaluation marked as a No Rehire must be sent to the Lifeguard Supervisor or Parks Director.

LIFEGUARD EVALUATION REPORT

End of Season

		d of Dealous		
Royan	0		Facility: Saxon	
NAME: /18/12			racinty:	
(Last)	(First	(Middle)		

PERFORMANCE INDICATORS: S = Satisfactory I = Improvement needed U = Unsatisfactory

PERFORMANCE FACTORS to evaluate all lifeguards: (including Captain & Lieutenant)

Did this Lifeguard:	Rate	Did this Lifeguard:	Rate
1. Promptly report for duty (on time)? (Not excessively absent)	S	8. Wears uniform properly and appropriately?	\$
2. Obeys workplace rules and regulations?	5	9. Adequately handle emergencies? (Shows good judgement)	S
3. Communicate with the public with tactful yet positive results?	S	10. Demonstrate competency in water safety skills?	S
4. Perform assigned duties? Participates in in-service and meetings	I	11. Demonstrate competency in first aid skills?	S
5. Accept authority and responsibility? Applies rules and regulation consistently	5	12. Cooperate with fellow staff?	I
6. Initiative Ability to act on his/her own and take the lead.	5	13. Demonstrate knowledge of lifeguard principles and techniques	S
7. Commensurate to the job?	S	14. Demonstrate competency in swimming and endurance skills?	S

EVALUATION PERFORMANCE FACTORS for Captain and Lieutenant only:

Did this Supervising Lifeguard:	Rate	Did this Supervising Lifeguard:	Rate
A. Cooperate with Superintendent and staff?	I	D. Delegate authority and responsibility?	S
B. Assume supervisory authority and responsibility? (Applies rules consistently, and equally among all staff)	5	E. Demonstrate ability to instruct lifeguard & first aid skills and coordinate the staff with facility management?	5
C. Complete the required paperwork?	S	F. Certifications (WSI/LGI)	S

Print evaluators name

Signature of evaluator

Date completed

Page 1 of 2

Current Pay Rate: <u>-4.50</u> Year Hired Recommend for Salary increase: Yes X	: <u>2016</u> No Candidate Eligible for	Rehire? Yes No
Conditions for Rehire:		
Worked until End of Season: YesNo_	x Last Day? <u> </u>	
LIFEGUARD E	VALUATION REPORT PA	GE 2
PRINT EMPLOYEE NAME:		
(Last)	(First)	(Middle)
CAPTAIN/LIEUTENANT COMMEN	ITS:	
		*
Signature of evaluator	Title of evaluator	Date
Facility Manager must evaluate the highest super Lieutenant at the Facility Managers discretion.		
SUPERVISOR COMMENTS: + first aid. did a soul We need more in-service done	did a gleat job do	edy heepings
We need make in-service done	and we needed less f	Ra Fraternizing
With the Park Rangers and M	ore has an Walking the	deck as
ht Har		9/3/12
Supervisor	Title of evaluator	Date
EMPLOYEE REMARKS:		
Signature of employee		Date

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If additional space is needed for remarks, please use additional sheets which should be signed by all parties.

Lifeguard Warning Notice

The following warning was issued today and it is to be made part of the official record.

Mame Peyra	7 3 \22 Date
 () Unreported absence () Tardiness () Drinking on duty () Reporting under the influence () Insubordination (×) Dishonesty () Failure to obey orders 	 () Fighting on premises () Leaving without permission (×) Improper conduct () Violation of rules () Defective or improper work () Careless () Destruction of property () Other:
REMARKS:	
After countless con	versations about
excessive	vocations.
Still granted	a vactition for
4h6 proming we	ekerol.
Use reverse side if necessary	
I have read this report:	Signature of Supervisor
	Signature of Employee
The warning has been noted and is made as of this date:	part of the above employee's record,
WARNING 1 2 3	Date