



CLASS DATE: \_\_\_\_\_

INSTRUCTOR NAME: \_\_\_\_\_

CLASS LOCATION | COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HEARTSAVER	BLS	Other
<input type="checkbox"/> First Aid <input type="checkbox"/> Adult CPR/AED <input type="checkbox"/> Child CPR/ AED* <input type="checkbox"/> Infant CPR/AED* <input type="checkbox"/> Skills Check	<input type="checkbox"/> BLS <input type="checkbox"/> BLS Renewal <input type="checkbox"/> BLS Skills	<input type="checkbox"/> Friends & Family <input type="checkbox"/> New Parent Prep <input type="checkbox"/> BBP <input type="checkbox"/> Instructor Core <input type="checkbox"/> EKG <input type="checkbox"/> Other _____

**\*Check correlating box in Enrollmentware**

The American Heart Association strongly promotes knowledge and proficiency in BLS, ACLS, and PALS and has developed instructional materials for this purpose. Use of these materials in an educational course does not represent course sponsorship by the American Heart Association. Any fees charged for such a course, except for a portion of fees needed for AHA course material, do not represent income to the Association.

Completed Course Roster must be submitted within 1 day of the class. For Students who have not yet met course completion requirements, a copy of their written examination answer sheet and skills performance sheet is attached to the roster. For online courses copy of the on-line certificate **must** also be attached to the roster.

I verify that I have followed the AHA requirements in presentation & testing for this class & have used the AHA course materials. I have included the roster, evaluations, required written test answer sheet, & skills performance sheets for all students.

**Lead Instructor Name:**

**Lead Instructor Signature:**

**Date:**

**Additional instructors:**

**Sections taught:**



**By printing my name on the roster, I agree to the following**

The course for which you are enrolled may include physical strain, possibility for cross infection, and emotional stress. CPR is very strenuous both in practicing on the manikin and performing CPR on a cardiac arrest victim. If you have any medical conditions or cardiovascular disease history that may be aggravated by this course, please consult your physician as to whether you should participate in a CPR course. If you have any reservations about your ability to perform CPR on a cardiac arrest victim, you may want to reconsider taking this course. If you have recently had any infectious disease, including upper respiratory infection or open sores on your mouth and/or on hands, it is imperative to defer manikin practice. The AHA and its TCs are not certifying agencies. The AHA and its TCs are not responsible for the level of classes taught to participants.

**By filling in my name by hand, initialing by my typed name below I have acknowledged that I have read all the above statements and absolve the American Heart Association, its TCs, and instructors from any liability associated herewith. I do not currently have any infectious disease.**

NAME	TEST SCORE OR CERTIFICATE #	STATUS	REMEDIAION DATE (If Needed)
1.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
2.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
3.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
4.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
5.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
6.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
7.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
8.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	
9.		<input type="checkbox"/> Completed <input type="checkbox"/> Completed after remediation <input type="checkbox"/> Not yet completed	