

**American Heart Association Emergency Cardiovascular Care Programs**  
**Heartsaver®**  
**Course Roster**

**Course Information (Choose one course only)**

- Heartsaver CPR AED** (optional topics listed below)
  - Child CPR AED**
  - Infant CPR**
  - Written Test**
  
- Heartsaver First Aid CPR AED** (optional topics listed below)
  - Child CPR AED**
  - Infant CPR**
  - Written Test**
  
- Heartsaver First Aid** (optional topics listed below)
  - Written Test**

**Instructor** \_\_\_\_\_

Training Center Interior Region EMS Council, Inc.

Training Center ID# AK03066

Training Site Name (FMH only) \_\_\_\_\_

  

Course Location \_\_\_\_\_

Address \_\_\_\_\_

City, State ZIP \_\_\_\_\_

Course Start Date/Time \_\_\_\_\_ Course End Date/Time \_\_\_\_\_ Total Hours of Instruction \_\_\_\_\_

No. of Cards to be Issued \_\_\_\_\_ Student-Manikin Ratio \_\_\_\_\_ Issue Date of Cards \_\_\_\_\_

*Assisting Instructors (Attach copy of instructor card for instructors aligned with a TC other than the primary TC)*

<i>Name and Instructor ID#</i>	<i>Card Exp. Date</i>	<i>Name and Instructor ID#</i>	<i>Card Exp. Date</i>
1.		5.	
2.		6.	
3.		7.	
4.		8.	

I verify that this information is accurate and truthful and that it may be confirmed. This course was taught in accordance with AHA guidelines.

\_\_\_\_\_  
Signature of Lead Instructor

\_\_\_\_\_  
Date

Date \_\_\_\_\_ Course \_\_\_\_\_ Instructor \_\_\_\_\_

**Course Participants**

<i>Name and Email</i> <i>Please PRINT as you wish your name to appear on your card. Please print email address legibly.</i>		<i>Home Mailing Address</i>			<i>Telephone</i>	<i>Complete/ Incomplete</i>	<i>Remediation/Date Completed (if applicable)</i>
1. First Name	Last Name						
Email		City	State	Zip Code			
2. First Name	Last Name						
Email		City	State	Zip Code			
3. First Name	Last Name						
Email		City	State	Zip Code			
4. First Name	Last Name						
Email		City	State	Zip Code			
5. First Name	Last Name						
Email		City	State	Zip Code			
6. First Name	Last Name						
Email		City	State	Zip Code			
7. First Name	Last Name						
Email		City	State	Zip Code			
8. First Name	Last Name						
Email		City	State	Zip Code			
9. First Name	Last Name						
Email		City	State	Zip Code			
10. First Name	Last Name						
Email		City	State	Zip Code			