BLS Rules LLC **American Heart Association**

rosters@blsrules.com **Emergency Cardiovascular Care Program** **Submit students online at**

**www.blsrules.com\_instructor** resources\_ Course Roster Entry C**ourse Roster**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Course Taught: | * HeartSaver First Aid * HeartSaver First Aid w/AED * HeartSaver AED * HeartSaver Bloodborne Pathogens * HeartSaver Pediatric First Aid w/AED * HeartSaver K-12 First Aid w/AED * BLS Provider □ Skills Test * BLS or HS Instructor | | Billing Name | | | | | |
| Billing Address | | | | | |
| City | | | State | | Zip |
|  | Course Location | | | | | |
|  | Lead Instructor | | | | | |
|  |  | | | | | |
| Course Start Date | Course Start Time | Course End Date | Course End Time | Total Hours of Instruction | Student/Manikin Ratio | | | |
| Number of Students | Number of students to be issued cards |  | |  | | | | |
| Print Names of Assisting Instructors | | Training Center | | Instructor Level | | | Expiration Date | |
| 1. | |  | |  | | |  | |
| 2. | |  | |  | | |  | |
| 3. | |  | |  | | |  | |
| 4. | |  | |  | | |  | |
| 5. | |  | |  | | |  | |
| *I verify that this information is accurate, truthful, and that it may be confirmed. This course was taught in accordance with AHA Guidelines which includes all students having a current course workbook before, during, and after the course.*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Lead Instructor Date | | | | | | | | |

Revised 10/06/2016

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **STUDENT INFORMATION: Please Print** | | **INSTRUCTOR USE ONLY** | | | |
| *Email address and phone are used for expiration reminders and for quality assurance purposes only.*  *We do not sell your contact information.* | | Exam Score (%) | Skill Check off | Remediation Provided: Date Completed | Course Completed (Y/N) |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |
| Name | Email Address |  |  |  |  |