

## American Heart Association Emergency Cardiovascular Care Programs Instructor Candidate Application

**Instructions:** To be completed by the instructor candidate with appropriate signatures. Complete 1 application for each discipline.

<b>Application for Instructor Status</b> : Select the discipline you are applying for (select only 1):					
			□ ACLS EP	`	•
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Candidate's name:					
Mailing address:					
City:				Zin code:	
Phone:					
<ul> <li>Instructor Commitment: As an AHA Instructor, I agree to</li> <li>□ Teach at least 4 courses in 2 years in accordance with the guidelines of the AHA</li> <li>□ Maintain a current provider card</li> <li>□ Strengthen and support the Chain of Survival and the mission of the AHA in my community</li> <li>□ Conduct myself in accordance with the ECC Leadership Code of Conduct</li> <li>□ Avoid any perception of conflict of interest in accordance with the AHA Statement of Conflict of Interest</li> </ul>					
Signature of instructor	or candidate: _			Date:	
<ul> <li>Verification of Instructor Potential: I verify that this instructor candidate has achieved a score of 84% or higher on the provider written examination in the discipline for which he or she is applying and has completed at least 1 of the following options:</li> <li>□ Has been identified as having instructor potential during performance in a provider course</li> <li>□ Has demonstrated instructor potential during a screening evaluation</li> <li>□ Has demonstrated exemplary performance of provider skills under my direct observation</li> </ul>					
Signature of Training Center (TC) Faculty/Course Director:					
Date:					
TC Alignment and Instructor Network Verification: TC Coordinator of aligning TC has verified the following:  □ I approve this application and grant alignment with this TC for this applicant. I agree to all responsibilities for this instructor as outlined in the current <i>Program Administration Manual</i> .  □ I verify that this instructor is registered on the Instructor Network and has been approved as an instructor in this discipline and is aligned with this TC.  Instructor ID #:					
			TC ID #:		
Signature of TC Coordinator:				Date:	