StDavid's INSTITUTE FOR LEARNING

St David's Institute for Learning BLS Instructor Registration Form Complete ALL sections LEGIBLY!

Name	Facility	Dept
Address	City	Zip
Phone Alternate phone		
Email address		
Director/Supervisor		
Today's Date:Co	urse Dates:	
This course is open to St. David	d's Healthcare Employe	es ONLY
I am currently an instructor inACLSF	PALSI am not an ins	structor in either
Course cost: SDH Employee—\$150if billed to your department—must have COID, Dept # and Director/Supervisor's signature below:		
Director/supervisor namePhone		
Director/supervisor signature		
Director/supervisor Email		
Facility NameCOID	_Dept #Cos	tCenter#
CREDIT CARD PAYMENT Please charge my	St. David's Institute for Learn	ing
□ VISA □ MasterCard □ Discover □ American Express	CPR-ECC Training Center	
Name on Card:	7800 Shoal Creek Blvd. 124- Austin, TX 78757	S
Account No	or	
Exp. Date:	Fax form to: (512) 544-0130	
Signature:	If you have questions: (512)	544-0100

Acceptance as a BLS Instructor requires:

- 1. A valid and working email address—your own and not someone else's. If you don't have one, you can get a free one at <u>www.hotmail.com</u> or <u>www.yahoo.com</u>.
- 2. Completion of the AHA Core Instructor online course, if you are not currently an AHA instructor. You will receive a packet with the Core Instructor course manual and CD 2-4 weeks prior to the course. You must complete the course either with the enclosed DVD OR by logging onto the AHA instructor site and taking it there and **bring the certificate of completion to class.**
- 3. A letter recommending you as an instructor from your supervisor (see the 2nd page of this form). This can also be sent via fax to 544-0130 or email to <u>robert.williams@stdavids.com</u>



St David's Institute for Learning BLS Instructor Recommendation

The BLS Instructor Course is designed for health care professionals who are currently proficient BLS Providers and have a firm working knowledge of the rationale and interventions in Basic Life Support. Resuscitation and teaching experiences are extremely helpful.

Please address experience with resuscitation, basic life support skills and teaching experience in the recommendation below.

Recommendation_____

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Recommended by	Title
Date	
	Mail to:
	St. David's Institute for Learning
	CPR-ECC Training Center
	7800 Shoal Creek Blvd. 124-S
	Austin, TX 78757
	or
	Fax form to: (512) 544-0130
	If you have questions: (512) 544-0100