

American Heart Association Emergency Cardiovascular Care Program

Notice to Primary Training Center of Instructor Teaching Activity

Instructions: When an instructor teaches a course at a Training Center (TC) other than his or her primary TC, this form is to be completed and sent to the instructor's primary TC. A letter with the same information or a copy of the course roster (without scores) may also meet this requirement.

SECTION 1:		
Instructor Information		
Instructor name:	Instructor ID#:	
Instructor ID #:	Instructor card expiration date:	
Discipline: Heartsaver [®] BLS ACLS	\Box ACLS EP \Box PALS \Box PEARS [®]	
□ ASLS		
SECTION 2:		
Primary TC Information		
TC name:	TC ID#:	
TC address:		
City:	State: Zip code:	
TCC name:	Phone:	
SECTION 3:		
Sponsoring TC and Course Information		
This confirms that the above-named instructor has taught the following course:		
TC name (sponsoring course):	TC ID#:	
Training Site (if applicable):		
TC address:		
City:	State: Zip code:	
TC Coordinator name:	Phone:	



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Date of course:	Location:
Type of course taught:	
Modules/stations taught:	
Course Director/Lead Instructor name:	Instructor ID#:
Signature of Course Director/Lead Instructor:	Date: