

Basic Life Support Course Roster

Emergency Cardiovascular Care Programs



Course Information

- ☐ BLS Course
- ☐ BLS Renewal Course
- ☐ HeartCode® BLS
- ☐ BLS Instructor Course

Lead Instructor _____
Lead Instructor ID# & Exp. Date _____
Lead Instructor Email _____
Lead Instructor Phone Number _____
Training Center & ID# University of Rochester Medical Center NY04387
Training Site & ID# _____
Course Location _____
Address _____
City, State ZIP _____

Course Start Date _____	Course End Date _____	Total Hours of Instruction _____
Course Start Time _____	Course End Time _____	Student-Manikin Ratio _____

Assisting Instructors

Name and Instructor ID#	Card Exp. Date	Name and Instructor ID#	Card Exp. Date
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

Course Participants

Course

BLS Course
BLS Renewal Course
HeartCode BLS
BLS Instructor Course

Date _____

Lead Instructor _____ Lead Instr. ID# _____



<i>Name and Email</i> <small>Please PRINT as you wish your name to appear on your card. Please print email address legibly.</small>	<i>Mailing Address/Telephone</i>	<i>Complete/ Incomplete</i>	<i>Test Score (if applicable)</i>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Course Participants

Course

BLS Course
BLS Renewal Course
HeartCode BLS
BLS Instructor Course

Date _____

Lead Instructor _____ Lead Instr. ID# _____



<i>Name and Email</i> <i>Please PRINT as you wish your name to appear on your card.</i> <i>Please print email address legibly.</i>	<i>Mailing Address/Telephone</i>	<i>Complete/ Incomplete</i>	<i>Test Score (if applicable)</i>
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19			
20.			

Course Participants

Course

BLS Course
BLS Renewal Course
HeartCode BLS
BLS Instructor Course



Date _____

Lead Instructor _____ Lead Instr. ID# _____

<i>Name and Email</i> <i>Please PRINT as you wish your name to appear on your card.</i> <i>Please print email address legibly.</i>	<i>Mailing Address/Telephone</i>	<i>Complete/ Incomplete</i>	<i>Test Score (if applicable)</i>
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			