

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.

Application for Instructor Status: Select the discipline you are applying for (select only 1):						
□ Неа	eartsaver®	□ BLS	□ ACLS	□ ACLS EP	□ PALS	\square PEARS $^{\mathbb{R}}$
Renewal o	date of provi	der card:				
Candidate	e's name:					
Mailing a	nddress:					
City:			State:		Phone:	
Email:						
Instructor Commitment: As an AHA Instructor, I agree to □ Teach at least 4 courses in 2 years in accordance with the guidelines of the AHA □ Maintain a current provider card □ Strengthen and support the Chain of Survival and the mission of the AHA in my community □ Conduct myself in accordance with the ECC Leadership Code of Conduct □ Avoid any perception of conflict of interest in accordance with the AHA Statement of Conflict of Interest Signature of instructor candidate:						
Verification of Instructor Potential: I verify that this instructor candidate has achieved a score of 84%						
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