

## American Heart Association Emergency Cardiovascular Care Program Instructor/TCF Teaching Activity Notice to Primary TC

## **Instructions:**

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

Primary TC Information				
Name of TC Coordinator:				
TC Name:				
Address:				
Phone:	Fax:			
Email:				
Name of Instructor/TCF member:				
Discipline: □ HS □ BLS			-	
Instructor card expiration date:		_		
<b>Course Information</b>				
This confirms that the above-name course:	d Instructor/	TCF member	has taught the following	1g
TC sponsoring course:				
Training Site (if applicable):				
Date of course:				
Type of course taught:				
Modules/stations taught:				
Name of Course Director/Lead Instru				
Signature of Course Director/Lead Instructor:			Date:	