INSTRUCTOR DATA SHEET

Only instructors approved and authorized by American Academy of Pediatrics (AAP)/American Heart Association (AHA) can teach these programs and provide completion cards. Instructors must be affiliated with an approved Training Center (*i.e.,* ***Holy Cross Hospital Training Center***

1. **Please check box that indicates your affiliation:**

**{ }** Independent Instructor (New Training Center) **{ x }** Instructor for Existing Training Center

(***Holy Cross Hospital***)

1. **Method of Instructor Authorization: (section # 4)**

**{ }** Reciprocity **{X}** Holy Cross Hospital (AAP) **{ }** Apprenticeship

**3. Please print or type the following information:**

Contractor’s (Instructor’s) Name:

Company/Organization/Training Center: Holy Cross Hospital (AAP

**4. Address**:

City: State: Zip:

Phone (Work): (Home):

FAX: E-mail Address

(If you will be paid by PHSI please include your ssn# for 1099 purposes)

SSN#\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**5. Please check all applicable below.**

**{ }** MD/DO **{ }** PhD/EdD **{ }** MA/MS/MEd **{ }** RN **{ }** BA/BS/BSN **{ }** PA **{ }** RT v LPN **{ }** AA/AS/AAS

**{ }** NREMT-P/EMT-P**{ }**NREMT-B/EMT-B **{ }** FIRE/EMS Instructor **{ }** ARC Instructor **{ }** NSC Instructor

**{ }** AHA Instructor **{ }** AHA Instructor Trainer **{ }** Other:

**6. Have you ever had a medical or instructional license or certification suspended, revoked, cancelled, or denied in any state?**

**{ }** Yes\* **{ }** No

**7. I understand and agree to:**

* Teach in accordance with the most recent American Academy of Pediatrics (AAP)/American Heart Association (AHA) curriculum and administrative policies and procedures as described in the AAP *Training Center Administrative Manual*.
* Promptly comply with any specific quality assurance actions recommended by American Academy of Pediatrics (AAP)/American Heart Association (AHA), the Program Advisory Committee or Subcommittee or an Authorized Regional Instructor-Trainer.
* Maintain current authorization as an Instructor while teaching American Academy of Pediatrics (AAP)/American Heart Association (AHA) programs. I understand maintaining authorization currently requires teaching two classes per year.
* Be monitored for the purposes of quality assurance.
* Not engage in dishonest, unethical, or unprofessional conduct; including but not limited to, issuing unearned program completion cards, slander, or cultural, physical, racial, gender, age, or sexual bias.
* Not engage in fraudulent or illegal actions, such as discrimination, forgery, misrepresentation, or unauthorized duplication of copyrighted training materials.
* Complete and submit paperwork in a timely manner.

**8.** **Instructor acknowledges**: Payment will be $35 per hour (hours must be pre-agreed upon before work as started) Payment for classes taught will be paid through PHSI/ Terry White per invoice submitted by instructor.

In order to meet the requirements for payment the instructor must have completed the two monitored classes required by the Holy Cross Hospital’s train Center per year. All Instructors are Contractors.

**9**.\_\_day of \_\_\_\_\_ in the year 2017.

**10. Signature of Instructor:**

**11.** IT certifiesthis person has completed the requirements for authorization as an American Academy of Pediatrics (AAP)/American Heart Association (AHA) instructor in accordance with the most recent AHA curriculum and administrative policies and procedures. (Note: Additional paperwork for each instructor may be necessary.)

**12. Print IT Name:** **Signature of IT**­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**13. Type of Instructor Authorization and Expiration:**

**{ }** BLS/AED \_\_\_\_\_\_\_ **{ }** ACLS\_\_\_\_\_\_\_ { **}** PALS\_\_\_\_\_\_\_\_ **{ }** NRP **{ }** First Aid .

Please return this data sheet and your dates you plan to teach or to be monitored. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To: Terry White in Nurse Education @ Holy Cross Hospital

or

Email: www.whitete@holycrosshealth.org