This form should be completed by the instructor. Please fill in a copy every time you deliver a Heartstart course. Then pass it to your Scheme Coordinator who should keep it with the scheme’s records. You can also keep a copy of this form for your own class records.
Class record form

Scheme name

Date of course delivery

Attendees signatures

Please ask all attendees to sign below:

Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Print name  Signature
Class record form

Number of attendees

Venue

**Signatures**

Name of instructor (print)

Instructor signature

Date (of form completion)

Instructor comments

Please continue on a separate sheet if necessary.