



CPR PLUS

1013 Logan Avenue
Cheyenne, WY 82001
307-426-4007

www.cprpluswyoming.com

Class Evaluation Form

Instructions: Please take a few minutes to complete this evaluation for the course that you just participated in. We are always open to comments/concerns as we strive to provide you with the best courses possible. Thank you!

Please select the course that you just attended:

- BLS Provider
- Heartsaver CPR/AED Adult *and/or*
 - Child CPR/AED
 - Infant CPR
- Heartsaver First Aid ONLY
- Heartsaver First Aid with
 - Adult CPR/AED *and/or*
 - Child CPR/AED
 - Infant CPR
- Heartsaver Pediatric First Aid AED (Child/Infant) *and/or*
 - Adult CPR AED
 - Asthma Care Video
 - Written Exam

Course Information

Date of Course _____

Length of Course _____
(Start to Finish Times)

Did the class include the mandatory video mediated presentation? **Yes or No**

Were you issued a written exam? **Yes or No**
(Only given for Healthcare Provider, Heartsaver Optional)

Title of textbook _____
(If you do not have a textbook for this course please let us know. Thanks!)

Instructor Name _____

Overall Impression of Instructor _____

Evaluation of Course and Pre-Registration

Please rate management of this course by circling the appropriate number using the scale below.

1=Unsatisfactory
3=Acceptable
5=Excellent

Registration	1	2	3	4	5
Presentation	1	2	3	4	5
Manikin Skills	1	2	3	4	5
Class Atmosphere	1	2	3	4	5

Manikin to Student Ratio 1:1 2:1 3:1

Please submit your evaluation form to the instructor at the end of the course. If you prefer you can also mail this form either directly to the training center at the address above or to the Regional ECC office at:

American Heart Association
7272 Greenville Ave
Dallas, TX 75231