



American Heart Association Emergency Cardiovascular Care Program
BASIC LIFE SUPPORT COURSE EVALUATION SUMMARY

DATE: _____ Instructor(s): _____

Please rate the following aspects of the program and give comments for future courses.

1=Poor 2=Below Average 3=Average 4=Good 5=Excellent

Administration and Facilities					
It was easy to enroll in the course	1	2	3	4	5
I received my Heartsaver Student Workbook & CD in time for me to read the pre-class assignments	1	2	3	4	5
The course facilities were adequate	1	2	3	4	5
There was enough equipment available for everyone to practice skills with little "standing around" time	1	2	3	4	5
The equipment was clean and in good working order	1	2	3	4	5
Instruction					
My instructor communicated clearly	1	2	3	4	5
The instructor answered my questions	1	2	3	4	5
Satisfaction					
I would recommend this course to others	1	2	3	4	5
I can apply the skills I learned	1	2	3	4	5

Why did you take this course? _____

Any comments you would like to make on the delivery, facilities, instructor, and overall satisfaction with the course? _____

Please submit your comments to the instructor at course end, or if you prefer, you can mail this form either directly to the Training Center and/or the Regional ECC Office (call 1-888-CPR-LINE for the address).