 

COURSE SUBMISSION COVER SHEET

Send this completed form to Safety & Risk Management along with the course roster to: [KMarshall@csustan.edu](mailto:KMarshall@csustan.edu)

You **MUST** use the attached course roster form and type in participant’s information.

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| --- | --- | --- |
| Instructor Name: | Department: | Phone: |
| Date: | Course: | Date of course: |
| Account # | # of attendees: |  |

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| --- | --- | --- |
| Certification charges | Equipment charges | AHSI Materials |
| Adult CPR: $6 pp | Adult Manikins $2 pp | Instructor Manual: $50 |
| Adult CPR & First Aid: $10 pp | Infant Manikins $1 pp |  |
| Adult, Child, Infant CPR & First Aid: $10 pp | First Aid Equipment $1 pp |  |
| Blood Borne Pathogen: $6 pp |  |  |
| CPR for The PRO: $6 pp |  |  |

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| **FOR OFFICE USE ONLY** |  |  |
| Entered in OTIS: | Invoice #: |  |
| Entered in Peoplesoft: | Course Code: | Session: # |
| Student Entry: |  |  |
| **Charged account:** | **Amount: *$*** | **AHSI Invoice Paid:** |
| Equipment rental |  |  |
| Adult manikins: *#* | Infant Manikins: *#* | First Aid supplies: *#* |

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|  | **Class Upload Form** |  |
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| Student Last Name | Student First Name | Student Email |
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