

## VTEMSD#3 First Responder Course Instructor Candidate Checklist

This checklist should be completed during a District #3 approved First Responder course (1995 curriculum). The Course Coordinator and the Instructor Candidate will work together during this course to complete this checklist.

Instructor Candidate's Name: \_\_\_\_\_

Course Coordinator's Name: \_\_\_\_\_

Course Start Date: \_\_\_\_\_ Course Finish Date: \_\_\_\_\_

Course Location: \_\_\_\_\_

1. The Instructor Candidate planned and administered the following lessons using the objectives in the 1995 National Standard First Responder Curriculum:

Date: \_\_\_\_\_ Topic and lesson number: \_\_\_\_\_

Date: \_\_\_\_\_ Topic and lesson number: \_\_\_\_\_

Date: \_\_\_\_\_ Topic and lesson number: \_\_\_\_\_

2. The Instructor Candidate planned and organized the following practical sessions using the objectives in the 1995 National Standard First Responder Curriculum:

Date: \_\_\_\_\_ Topic and lesson number: \_\_\_\_\_

Date: \_\_\_\_\_ Topic and lesson number: \_\_\_\_\_

Date: \_\_\_\_\_ Topic and lesson number: \_\_\_\_\_

3. The Instructor Candidate generated at least one class quiz or exam

Date: \_\_\_\_\_ Module number: \_\_\_\_\_

4. \_\_\_\_\_ The Instructor Candidate has been given a "First Responder Resource Packet" distributed by the District #3 Training Committee

5. \_\_\_\_\_ The Instructor Candidate assisted during at least 80% of the practical and lecture sessions of a District #3 approved First Responder course (1995 curriculum).

### For Instructor Candidate:

By signing below, I am indicating that the information in the above checklist is accurate and complete. I also acknowledge that completion of this checklist does *not* guarantee that District #3 will approve courses proposed by me:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### For Course Coordinator:

By signing below, I am indicating that the abovementioned Instructor Candidate completed this checklist under my supervision. During the length of this First Responder course, the Instructor Candidate developed proficiency in using and implementing the 1995 National Standard First Responder Curriculum. I am also indicating that the Instructor Candidate is familiar with the District and State requirements for proposing and coordinating a First Responder course:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

When completed, please turn this checklist in to the District #3 Training Committee Chair.