COLORADO DEPARTMENT OF HUMAN SERVICES
DIVISION OF EARLY CARE AND LEARNING
FIRST AID/CPR TRAINING ATTESTATION

PLEASE PRINT CLEARLY

Date _____

Name & Title _____

Organization _____

Mailing Address _____

City _____ State _____ Zip _____

Phone (home) _____ (Work) _____ (Fax) _____

E-mail Address _____

Website Address _____

Which Information would you like to have listed in the Approved Training Vendor Directory?
☐ Address ☐ Home Phone ☐ Work Phone ☐ Fax Number ☐ Email ☐ Website

What training is offered? First Aid ☐ CPR ☐ Wilderness First Aid ☐

What is the length of each class? First Aid _____ CPR _____ Wilderness First Aid _____

If the training is offered in languages other than English, what language is offered? _____

In what counties or area(s) of the state is training offered? _____

Attestation Statement:

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that this training is conducted in accordance with the most recent American Heart Association's Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC) Guidelines that are updated every 5 years, most recently in 2010. The instruction time this training shall require is a minimum of 2 hours each for First Aid and CPR training. The training includes skills demonstration with life-size/age-appropriate mannequins using a recommended ratio of 1:6. The training shall focus on infants, toddlers and children. All instructors shall remain current with their training to teach to the most current international ECC guidelines in CPR and First Aid. In the event this training is found out of compliance with the CPR ECC Guidelines and/or if the instructors do not remain current with their training to teach the most current international ECC guidelines in CPR and First Aid, the Division will remove the Organization from the Approved Training Vendor Directory located at www.colorado.gov/cdhs/TrainingVendors.

_____ _____
Signature Date

Please complete this form and return via mail, email or fax to:
Genie Hurt, Child Care Programs Coordinator
Division of Early Care and Learning
Colorado Department of Human Services
1575 Sherman Street, 1st Floor
Denver, CO 80203
303-866-4595 - Phone
303-866-4453 – Fax
Genette.Hurt@state.co.us

This Attestation shall be renewed by December 31st each year to remain on the Approved Training Vendor Directory.