Verified CPR/First Aid Banner Provider Application

About This Banner

This banner honors programs that demonstrate readiness to respond to health emergencies by ensuring a staff member is trained in both CPR and First Aid. It reflects a commitment to physical safety and preparedness, offering parents reassurance that trained individuals are available to act swiftly in urgent situations.

Section 1: General Provider Information

Program Name: _____

Physical Program Address: _____

Legal Business/Organization Name: _____

Contact Name & Title: _____

Website Link: _____

Section 2: Eligibility Questions

1. Is there at least one adult staff member on-site who has completed a CPR and First Aid training course?
☐ Yes   ☐ No
If yes, please provide their name and training date:

2. What type of CPR/First Aid training was completed?
☐ In-person workshop   ☐ Online course
☐ Pediatric-specific training   ☐ General/basic CPR/First Aid
☐ Other (please describe): _____

3. Name of the training provider or course title (e.g., Red Cross, local fire dept, online pediatric safety class):

4. Do you keep documentation of this training (such as a completion email, screenshot, or attendance confirmation)?
☐ Yes   ☐ No

5. Is there a clear plan for staff to know who the trained individual is and how to respond during emergencies?
☐ Yes   ☐ No
Briefly describe how this is communicated:

6. Where are your first aid supplies located?

☐ First aid kit on site   ☐ Emergency contact list available
☐ Supplies checked regularly for completeness

7. Do you review or refresh CPR/First Aid knowledge annually?
☐ Yes   ☐ No

8. How is the refresher handled?
☐ Re-watch training   ☐ New course   ☐ Team discussion

Section 3: Supporting Documentation

Please provide or be prepared to provide the following:

- **A photo or screenshot of the training confirmation**
- **A copy of your Staff Awareness Plan (Download Template)**

Section 4: Agreement

I confirm that the information provided in this application is accurate and that our program meets the safety expectations required to receive the Verified CPR/First-Aid Banner from **ParentApproved.org**.

By submitting this application, I agree that my responses may be reviewed for accreditation purposes and used to help create our provider profile. Public-facing details (such as program descriptions or photos) may be shared with my approval. Personal or sensitive information will remain confidential and will never be sold or shared with third parties.

I also understand that ParentApproved.org conducts periodic audits and reserves the right to revoke the banner if our program no longer meets the required criteria. If revoked, we agree to update or remove the displayed banner to reflect our current status.

Signature: _____

Date: _____

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1. ***Submit Completed Application***
   Email your application and supporting documents to: *apply@parentapproved.org*
2. ***Initial Review (within 7–10 business days)***
   Our team will review your responses, supporting materials, and alignment with eligibility criteria.
3. ***Follow-Up (if needed)***
   We may request clarification or offer guidance to help meet badge or banner standards.
4. ***Approval & Invoice***
   If your program meets the requirements, we will issue an invoice for the selected badges and banners.
5. ***Official ParentApproved.org Banner & Directory Listing***
   Once payment is received, your program will receive an official banner that you can display on your website and a custom listing in our ParentApproved.org Directory.