

### **Florida SouthWestern State College Healthcare Center**

### **American Heart Association (AHA) Training Partner Agreement**

This Agreement is made and entered into by and between:

**Florida SouthWestern State College ("FSW")  
Office of Corporate & Community Education  
8099 College Parkway, Fort Myers, FL 33919**

**Email: AHA@fsw.edu**

**Phone:** 239-489-9105

And

**[INSERT Corporate Partner Name] ("Partner")  
[INSERT Corporate Partner Address]  
Point of Contact: [INSERT]**

**Email: [INSERT]**

**Phone: [INSERT]**

### **Purpose**

FSW, through its authorized American Heart Association (AHA) Training Center, agrees to provide AHA-approved training courses to the Partner, its employees, or associated participants. This agreement outlines the terms of service, responsibilities, and cost structure related to the issuance of AHA certification cards and training support.

### **Term**

This Agreement shall become effective upon signing by both parties and remain in effect for one (1) year unless terminated earlier in accordance with the termination clause.

### **Services Provided by FSW**

FSW will:

* Provide AHA-compliant training courses, including but not limited to BLS, ACLS, PALS, and Heartsaver courses.
* Assign facilitator and AHA-certified instructors to conduct courses.
* Issue eCards upon successful completion of training.
* Maintain compliance with AHA policies, including instructor oversight, roster audits, and course monitoring.
* Provide scheduling access through AHA platforms and ensure timely card issuance.

### **Responsibilities of the Partner**

The Partner agrees to:

* Schedule courses no fewer than thirty (30) business days prior to the requested training date(s) and confirm participant numbers at least one week prior to training.
* Ensure that all participants meet course prerequisites, including pre-course assessments (as applicable).
* Provide a training location that meets AHA requirements, unless training is held at an FSW service location.
* Ensure payment for all training and card issuance per the agreed pricing.
* Maintain instructor compliance if using internal instructors under FSW’s AHA alignment, including submission of course rosters and adherence to AHA updates.

### **Cost Structure and Payment Terms**

Customized per course and location. A separate quote for course delivery, certification renewals, and eCards will be provided as needed. Additional travel, setup, and instructor fees may apply for off-site delivery.

1. **Payment Terms:**  
   Check payable to FSW Corporate & Community Education. A deposit of 50% of the estimated total for any FSW instructor-led course. A final invoice will be provided upon completion of services, with payment due within 30 days. Ecards are purchased through FSW’s online catalog.

### **Card Issuance and Recordkeeping**

All eCards will be issued via the AHA system within 5 business days of completed roster submission and successful payment confirmation. The Partner is responsible for confirming accuracy of names and emails before submission. Records will be retained per AHA and FSW policy.

### **Compliance and Site Review**

FSW reserves the right to conduct random audits, instructor monitoring, and course evaluations to ensure quality and compliance with AHA standards. Partners must be available for site reviews if using internal instructors under FSW alignment.

### **Termination**

Either party may terminate this Agreement with thirty (30) days written notice. Immediate termination may occur for breach of AHA compliance, misuse of eCards, or failure to remit payment.

### **Liability**

The Partner agrees to hold FSW harmless from any claims or damages arising from training performed at the Partner’s location or on FSW service locations or by Partner’s aligned instructors. Partner attests it carries general liability and workers’ compensation insurance which covers its employees for injuries, property damage and liability. Partner agrees to provide its certificate of insurance upon FSW request. FSW maintains general and professional liability coverage for its instructors and operations.

### **Miscellaneous**

This Agreement constitutes the full understanding between the parties and supersedes prior agreements. Any amendments must be in writing and signed by both parties.

1. **Signatures**

**Florida SouthWestern State College**

By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Jason Dudley

VP Business Affairs & Technology

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

**[Corporate Partner Name]**

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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