TRAIN-THE-TRAINER
CLASS ROSTER INSTRUCTIONS

The purpose of this roster is to collect information about participants who successfully completed a required Train the-Trainer program for First Aid and Choking, Fire Safety, Medication Administration, or Standard Precautions.

- Instructors must use the curriculum approved by UW-Green Bay/Wisconsin Community-Based Care and Treatment Training Registry.
- A non-refundable fee of $20.00 for each participant who successfully completes the training must be submitted with the roster. Roster and payment must be submitted online by credit card only. (Master Card/Visa)

Prior to the class – Log in to https://www.uwgb.edu/registry/approved-train-the-trainer-program-registry/class-rosters/

Day of training

- Have participants sign-in on blank roster, see page 2.
- Confirm/complete any missing participant information before participants leave the training.
- Assure participants that their contact information and their birthday will not be published on the registry. This information is gathered to confirm identity and to allow Training Registry to contact the participant if necessary.
- If a participant does not successfully complete the training, fails the test, or does not attend, draw a line through that person's name on the original roster and do not enter their name on the online registry.

Online Submission of roster and payment

- All participants, within 10 days of teaching the class, must be submitted using the emailed link.
- Click on the link and log in
- Enter each participant's information by clicking the "add another participant link".
    - There is a search feature to see if participants are already in the system.
        - Use the "search accounts" option
    - We suggest entering just the last name and clicking search
    - A list will be displayed, select the correct participant and the program will auto fill the information.
        - Only enter the person as a new participant if they do not appear in the list
        - Do not write over the information of a person, if it does not match your participant
- Upload a copy of the original roster and pay the $20/student fee
- Participants receive an email confirmation that they have been added to the registry and the person uploading the class receives a carbon copy of the email.

Reminder

- Maintain copies of class rosters and test results for at least two years from the date of the training.
- Indicate the class title on the top of the roster and upload/scan **all pages** of the completed class roster.

UNIVERSITY of WISCONSIN GREEN BAY

DHS APPROVED CLASS ROSTER: TRAIN-THE-TRAINER

Select a course

❒ Fire Safety ❒ First Aid and Choking ❒ Medication Administration ❒ Standard Precautions

INSTRUCTOR & TRAINING INFORMATION			
Program Name	Primary Contact Name	Approved Program Number	
Training Site Name	Start Date	End Date	Class Start Time
Street Address			
City	State	Zip	County
Instructor Name(s)			

PARTICIPANT INFORMATION			
First Name	Last Name	M.I.	
Birth date (MM/DD/YYYY)	Phone#	E-mail Address	
First Name	Last Name	M.I.	
Birth date (MM/DD/YYYY)	Phone#	E-mail Address	
First Name	Last Name	M.I.	
Birth date (MM/DD/YYYY)	Phone#	E-mail Address	
First Name	Last Name	M.I.	
Birth date (MM/DD/YYYY)	Phone#	E-mail Address	
First Name	Last Name	M.I.	
Birth date (MM/DD/YYYY)	Phone#	E-mail Address	

Total Number of Participants:____x $20.00 = $_____total

I affirm that all of the students listed on this roster, whose names are not crossed off, have successfully completed this training.

Signature_____ Date _____