*This form is generated quarterly by the CTC*
Complete this form by 05/01/02

# PAD

page22
# Volunteer Log
pagtot22

Page # for Unit: 1 of 1
unitid22 Unit: 01-005-7 untchk22
Entity: 01-005-2-8

Date Generated: 04/01/2002 date22
Estimated Number of Volunteers Needed: 10 (for unit) estvol22
**BLUFF PARK METHODIST**

**1. Date Completed:** dtcomp22

/ / 20
*(month) (day) (year)*

**2. Is there currently a non-study AED in this unit?**

nstaed22
1 O Yes ® Complete the Adverse Situation Notification form (if newly placed)
0 O No

**3. Has any PAD initiated training activity occurred (since the last volunteer log was completed) other than scheduled retraining?**

nschtr22
0 O No
1 O Yes ® **What type of training?** *(check all that apply)*

mockep22 O Routine Mock episodes
comptr22 O Computer review
video22 O Extra video review
othtrn22 O Other: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| spotrn22

**Note: Value = 10, not 2**

**4. Volunteer Status Information:**
*(check one for each volunteer)*

volchk24

| volid24 Volunteer ID: volacr24 | Active: Current | Active: Moved Unit/Entity | Not Yet Trained: Inactive | Not Yet Trained: Drop | Dropped Out of PAD (check primary reason): Medical/ Disability | Quit/ Gone | Too Burdensome | Interpersonal conflict | Adverse Situation *** |
|---|---|---|---|---|---|---|---|---|---|
| | | | volstt24 | | | | | | |
| (01) 01-005-001-9 GSMI | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| | 1 | 10 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| (02) 01-005-002-7 TDAV | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (03) 01-005-003-5 EWAI | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (04) 01-005-004-3 BHOT | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (05) 01-005-005-1 MKOR | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (06) 01-005-008-6 WFRE | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (07) | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (08) | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (09) | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |
| (10) | O1 | O2 | O3 | O4 | O5 | O6 | O7 | O8 | O9 |

* Missing Potential Volunteer Form.

** Volunteer does not appear on a Volunteer Training (Initial) Form.

*** If Volunteer dropped out due to Adverse Situation, complete the Adverse Situation Notification Form.

Please Mail to the CTC _____ Signature of person filling out this form code22 |__|__|-|__|__| Code Number **VOLLOG version 03.00 03/29/02**