



3340 Glenwood Street, Eureka, CA 95501 (707) 445-2081 (800) 282-0088 FAX (707) 445-0443

**EMT-I (RE)CERTIFICATION APPLICATION**

**CHECK ONE:**

New Certification  Challenge:  (If challenge, list qualifications: \_\_\_\_\_)

Recertification by Refresher Course\*:  Recertification by Continuing Education\*:

**\* IF APPLICATION IS FOR RECERTIFICATION, ATTACH ALL RECERTIFICATION REQUIREMENTS, INCLUDING COPIES OF CURRENT CPR FOR HEALTH CARE PROVIDER CARD (ONLINE CPR COURSES ARE NOT ACCEPTED), COPIES OF CE HOURS AND THE COMPLETED SKILLS VERIFICATION FORM. We DO NOT accept credit cards.**

**PLEASE PRINT**

Name: \_\_\_\_\_  
First Middle Initial Last

Mailing Address: \_\_\_\_\_  
Street City State Zip

Social Security #: \_\_\_\_\_ Home Phone # ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ EMT Employer: \_\_\_\_\_

Email Address: \_\_\_\_\_ Gender M \_\_\_ F \_\_\_

**VOLUNTEER FEE REDUCTION FOR NCEMS APPROVED FIRST RESPONDER AGENCIES**

North Coast EMS will reduce the certification fee by \$20 for all **volunteers** who are with a NCEMS approved first responder agency. Volunteers are defined as personnel not paid at all or those paid only on a call by call basis. **This reduction does not apply to those who work as an EMT or are paid by one agency but volunteer at another, seasonal firefighters, Cal Fire or USFS employees. Falsification of volunteer status will result in immediate revocation of the EMT's certification.**

Chief's Signature: \_\_\_\_\_

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

Fire Department: \_\_\_\_\_ Date: \_\_\_\_\_

**MUST COMPLETE THIS BOX IN ORDER TO BE CERTIFIED**

**Race/Ethnicity:**

- American Indian and Alaska Native  Hispanic or Latino  Asian
- Native Hawaiian and Other Pacific Islander  Black or African American  White

**EMS USE ONLY**

Receipt # \_\_\_\_\_ NCEMS Fee \_\_\_\_\_ EMSA Fee \_\_\_\_\_ Date Rec'd \_\_\_\_\_ How Paid \_\_\_\_\_ Cert# \_\_\_\_\_

LiveScan Date \_\_\_\_\_ ATI# \_\_\_\_\_ Issue Date \_\_\_\_\_ Exp Date \_\_\_\_\_

**EMT-I INITIAL CERTIFICATION REQUIREMENTS:**

1. Be at least eighteen (18) years of age at the time of submitting his/her request for EMT-I certification
2. Submit an application for certification
3. **Pay the established NCEMS certification fee of \$40.** This fee is reduced to \$20 for those who are volunteers with an approved NCEMS first responder agency. To be eligible for this waiver you must be a true volunteer and have your chief sign the application. **Falsification of the volunteer status may result in immediate revocation of the EMT certification. Those who are working as paid EMT's for one agency but volunteer for another are not eligible for the waiver.**
4. **Applicant must pay the Central Registry fee of \$75. The total amount is \$115 (or \$95 if a volunteer) payment needs to be made out to North Coast EMS.**
5. Applicant must document successful completion of a California EMS approved EMT-I training program within no more than two (2) years prior to applying for EMT-I certification.
6. Applicant must pass the National Registry EMT-I written and skills exams and provide a copy of their current National Registry EMT-I card and a copy of the NREMT certificate.
7. Applicant must submit a copy of a current CPR for the Healthcare Provider card; NCEMS does not accept online CPR courses.
8. Applicant must submit a copy of their EMT program course completion certificate.
9. Applicant must have a DOJ/FBI LiveScan background check done prior to submitting EMT application. All fees associated with this process are the responsibility of the applicant. Applicant must contact NCEMS to obtain the required DOJ LiveScan forms.

**EMT-I RECERTIFICATION REQUIREMENTS:**

1. Applicant should submit the recertification application, documentation and fee **at least thirty (30) days prior to expiration of current card.**
2. Applicant must document current California EMT-I certification.
3. Applicant must document successful completion of all EMT-I recertification requirements. These recertification requirements are:
  - a. Successful completion of a California EMS approved EMT-I 24 hour refresher course within the past 24 months, or
  - b. Successful completion of twenty-four (24) hours of California EMS approved continuing education (CE).
    - CE must be within limitations set forth in the EMS Authority's CE Guidelines and/or California state laws.
    - CE attendance must be completed within the last twenty-four (24) months prior to application for certificate.
  - c. Submit a completed Skills Competency Verification Form, EMSA-SCV (07/03). Form must be signed off by an approved evaluator.
  - d. Submit a copy of a current CPR for the Healthcare Provider card; NCEMS does not accept online CPR courses.
4. If applicant has not previously had a DOJ/FBI LiveScan background check done through NCEMS they must have it done prior to submitting a recertification application. All fees associated with this process are the responsibility of the applicant. Applicant must contact NCEMS to obtain the required DOJ LiveScan forms.
5. **Applicant must pay the Registry fee of \$37, if they previously had the LiveScan done or \$75 if they are doing their initial LiveScan background check. In addition to the North Coast EMS recertification fee of \$40. One payment for total amount to be made out to North Coast EMS.**

**EMT-I RECERTIFICATION AFTER A LAPSE IN CERTIFICATION (EMT-I has expired):**For a lapse of less than 6 months:

1. Applicant must meet the requirements listed above for EMT-I recertification.

For a lapse of 6 months or more, but less than 12 months:

1. Applicant must meet the requirements listed above for EMT-I recertification, and
2. Applicant must complete an additional twelve hours of CE for a total of 36 hours of training.

For a lapse of 12 months or more, but less than 24 months:

1. Applicant must meet the requirements listed above for EMT-I recertification, and
2. Applicant must complete an additional 24 hours of CE for a total of 48 hours of training, and
3. Applicant must pass the National Registry written and skills examination.
4. Applicant must have the DOJ/FBI LiveScan background check done again and pay the \$75 EMSA Central Registry Fee.

For a lapse of greater than 24 months:

1. Applicant must complete an entire EMT-I basic course and follow the steps for initial application.

**EMT-I CHALLENGE REQUIREMENTS:**

Prior to taking the North Coast EMS EMT-I written and skills certification examinations, applicants wishing to challenge EMT-I certification must submit documentation of eligibility to challenge EMT-I certification to North Coast EMS.

***IF CERTIFICATION FEES ARE PAID BY PERSONAL CHECK, CERTIFICATION WILL BE HELD THIRTY (30) DAYS FROM DATE OF RECEIPT OF THE COMPLETED APPLICATION AND CHECK.***

I hereby certify **under penalty of perjury** that all information on this application is true and correct to the best of my knowledge and belief, and I understand that any falsification or omission of material facts may cause forfeiture on my part of all rights to EMT certification in the state of California. I understand all information on this application is subject to verification, and I hereby give my express permission for this certifying entity to contact any person or agency for information related to my role and function as an EMT in California.

Signature: \_\_\_\_\_

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

ALL APPLICANTS REQUESTING CERTIFICATION MUST ANSWER THE FOLLOWING:

1. Have you ever applied for any prehospital or other health related certification in any county or state and been denied?

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain (attach additional documentation, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been the subject of a formal prehospital care or other health related certification disciplinary action or proceeding?

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain (attach additional documentation, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you ever been convicted of a misdemeanor within the last 7 years or any felony crimes?

NO \_\_\_\_\_ YES \_\_\_\_\_

**IF YOU HAVE YOU MUST ENCLOSE A WRITTEN EXPLANATION WITH THIS APPLICATION THAT DESCRIBES THE VIOLATION, DATES, FINES, PROBATION, DIVERSION, AND/OR CONVICTION, ETC. IN DETAIL, AND INCLUDE A SELF-EVALUATION OF THE INCIDENT AND OUTCOME. ALSO, PLEASE INCLUDE COPIES OF VERIFYING DOCUMENTATION FROM THE COURT.**

4. If you are recertifying your EMT status, do you have any pending EMS certification review actions?

NO \_\_\_\_\_ YES \_\_\_\_\_ If YES, explain (attach additional documentation, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. If applicant has previously notified North Coast EMS about the actions mentioned above, was certified by North Coast EMS, and has not received any further violations since that date, please initial. \_\_\_\_\_

**Be advised that North Coast EMS requires all EMT-I certificate holders to notify our office within 48 hours of any arrest and/or conviction. Failure to do so constitutes grounds for sanctions up to and including immediate certification revocation at the sole direction of the North Coast EMS Medical Director.**

I hereby certify that all statements made on or in connection with this application are true to the best of my knowledge and belief. I authorize North Coast EMS to perform any and all necessary background checks in order to validate the information that I have provided.

Signature: \_\_\_\_\_

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

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