



Livingston County EMS Course Application



Name _____ Date of Birth _____ Date: _____
 Address _____ Town/Zipcode _____
 Phone #: _____ Email Address: _____
 EMT#: _____ Level: _____ Expiration: _____

Type of Course (check one): Original: _____ Refresher: _____ Core Content: _____
 If Refreshing, do you plan on challenging the: Written: _____ Practical: _____

Level of Course (check one): CFR: _____ EMT: _____

Course Location: _____ Start Date: _____

Applicant's Affiliation with an EMS Agency

Check one: Current member _____ Applied for membership _____ Not Affiliated _____

Agency Name: _____ Agency Code #: _____

All information contained in, and submitted with, this application is true to the best of my knowledge, and I have read and understand the prerequisites listed below:

Signature: _____ Date: _____

General Prerequisites:

- Knowledge and Skills required show a need for high school or equivalent education
- Ability to communicate effectively via telephone and radio equipment
- Ability to lift, carry and balance up to 125 pounds (250 pounds with assistance)
- Ability to interpret oral, written and diagnostic form instructions
- Ability to use good judgment and remain calm in high stress situations
- Ability to be unaffected by loud noises and flashing lights
- Ability to read English language, manuals and road maps
- Ability to document, in writing, all relevant information in prescribed format in light of legal ramifications of such
- Ability to converse in English with coworkers and hospital staff with regard to the status of the patient
- Possesses good manual dexterity with ability to perform all tasks related to the highest quality patient care
- Ability to work with other providers to make appropriate patient care decisions
- New York State may deny certification to individuals with certain criminal convictions
- EMT students Must be at least 18 years of age (CFR Students must be at least 16 years of age)

**PAYMENT FOR TEXTBOOK AND OTHER COURSE EXPENSES DUE THE FIRST NIGHT OF CLASS.
 CASH, MONEY ORDER, PESONAL OR AGENCY CHECK ARE ACCEPTED.**

Mail completed applications to Livingston County EMS, 3360 Gypsy Lane, Mt. Morris, NY 14510

or

Fax: (585) 243-7187

or

Email to: kdewar@co.livingston.ny.us

For more information please call (585) 243-7596