



FINGER LAKES REGIONAL  
EMS COUNCIL, INC.

# EMS COURSE APPLICATION

## PERSONAL INFORMATION

NAME

TODAY'S DATE

DATE OF BIRTH

ADDRESS

PHONE

EMAIL

EMT #

LEVEL

EXPIRATION

## COURSE INTEREST

TYPE OF COURSE (CHECK ONE):

ORIGINAL

REFRESHER

CORE

COURSE LEVEL (CHECK ONE):

CFR

EMT

AEMT

CC

COURSE LOCATION:

## APPLICANT'S AFFILIATION WITH AN EMS AGENCY

CHECK ONE:

CURRENT MEMBER

APPLIED FOR MEMBERSHIP

\*NOT AFFILIATED

\*Non-Affiliation with an agency will be charged a tuition fee based on level of course.

AGENCY NAME

AGENCY CODE #

**PAYMENT FOR CLASS TUITION AND OTHER COURSE EXPENSES IS DUE TO THE EMS OFFICE PRIOR TO THE START OF THE THIRD SCHEDULED CLASS. ACCEPTABLE FORMS OF PAYMENT: CASH, CHECK, MONEY ORDER, OR CREDIT/DEBIT CARDS.**

COMPLETED APPLICATIONS CAN BE  
SUBMITTED TO [PAC@FLREMSC.ORG](mailto:PAC@FLREMSC.ORG)  
OR FAXED TO (315) 789-5638

General prerequisites and AEMT/CC  
required documentation are listed  
on the back of this form.

## GENERAL PREREQUISITES

1. Ability to communicate effectively via telephone and radio.
2. Ability to lift, carry and balance up to 125lbs (250lbs with assistance).
3. Ability to interpret oral, written and diagnostic form instruction.
4. Ability to use good judgement and remain calm in high stress situations.
5. Ability to read English language, manuals and road maps.
6. Ability to document, in writing, all relevant information in prescribed format in light of legal ramifications of such.
7. Ability to converse in English with co-workers and hospital staff with regard to the status of the patient.
8. Possesses good manual dexterity with ability to perform all tasks related to the highest quality patient care.
9. Ability to work with other providers to make appropriate patient care decisions.
10. New York State may deny certification to individuals with certain criminal convictions.
11. EMT students must be at least 17 years of age at time of test; 16 years of age for CFR students.
12. Students may have to obtain a Certificate of Residence from the county from which they reside.
13. Ability to be unaffected by loud noises and flashing lights.

## AEMT/CC REQUIRED DOCUMENTATION

**Your application packet will not be considered unless all the listed documents are completed and attached. There will be no exception to this requirement. Applicants accepted to the course will be notified by phone or email. Student load is limited and applicants to fill the seats are based upon completed application and documentation in addition to timely responses. If your application is not accepted as primary student load, you will be placed into a secondary category. If primary students do not fulfill their commitment, selection to fill the class will be made from the secondary category.**

### PLEASE ATTACHED THE FOLLOW DOCUMENTATION TO YOUR APPLICATION:

1. Copy of current EMT Card (must be valid through the end of the course). Students who do not meet this requirement must obtain an updated current card to remain in the entire course. If current EMT card is being renewed either through an EMT Refresher or EMT CORE program, please note so on application.
2. Copy of current CPR Card.
3. Copy of any other EMS or related certifications.
4. Finger Lakes medical-immunization-physical forms MANDATORY FOR CONSIDERATION.
  - Immunization forms may be obtained by downloading the ALS Immunization Packet from [www.flremsc.org](http://www.flremsc.org).
5. Brief resume indicating your reasons for taking this course, as well as education, training and EMS/Clinical experience.
6. THREE letters of recommendation
  - One from an EMS Agency Officer, which includes verification of providing prehospital care. This letter must include the date at which the applicant is cleared to perform with the sponsoring agency.
  - Others from an individual of your own choosing, preferable from the EMS or medical field.

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### FOR OFFICE USE ONLY

Date application received: \_\_\_\_\_ Application complete: \_\_\_\_\_ Medical forms complete: \_\_\_\_\_

Application reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_