

Washington County EMS Training Agency

2024 Hybrid Emergency Medical Technician Course

Applications are available on our website at

www.washingtoncountyky.com Applications are due NO LATER than August 2rd by 4:00 PM

(Applications can be emailed to emswashingtoncounty@gmail.com

Hand delivered, or mailed to the station)

Course Location:
Washington County EMS Station
126 Armory Hill, Springfield, KY 40069

Class <u>orientation</u> August 5, 2024 from 6:00 PM-8:30 PM (REQUIRED ATTENDANCE)

Class start date August 12th, 2024 and will run through the end of November

Class will be held on Thursdays from 5:30 PM-9:30 PM

Course Cost \$990.00 (all fees included)

^{**}Disclaimer, submission of application does not guarantee acceptance into the course**



Business Phone: (859) 336-5435 FAX: (859) 336-5088

EMT
First Responder

EMERGENCY MEDICAL SERVICES COURSE APPLICATION

Complete all Blanks that Apply:				
Name:(Last Name)				
(Last Name)	(First Name) (M	fiddle Name)	(Maiden if Applicable)	
Address:				
Tradicis.				
Citv:	State:Co	ounty:	Zip:	
Disch Data: Must	t be at Least 18 years or greater) Sex (M/F) M.	Acrital Status		
BIRII Date. (Iviusi	be at Least 18 years of greater) Sex (1911) iv.	Taritai Status		
	% & D			
Home Phone: ()	Phone () E:mail	Address:		
Valid KY Driver's License Number:	Expiration Date			
Years of Education: (R	Required) Minimum High School Diploma:	or GED Certificate:		
Other Education: EMR #	☐ Professional CPR Provider ☐ Professional CPR	Instructor	☐ Medical Terminology	
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being returned to you as incomplete. 1. Have you ever been convict (If yes, please provide a writter) 2. Have you ever been convict a felony, or participated in a (If yes, please provide a writter) 3. Have you ever been cited for (If yes, please provide a writter) 4. Have you ever had a civil ju were delivering or attemptir 5. Have you ever been in defar 6. Have you at any time had your Paramedic or it's equival in the Commonwealth of Koronical Commonwealth of Commonw	n explanation and a certified copy of court records). ted of a felony, pled guilty to a felony, entered into an all a diversion program for a felony? n explanation). or a moving violation while operating an emergency median explanation). udgment entered against you arising from a situation(s) in good deliver medical care? ult on any school loans? our certification(s) or registration(s) as an EMR, EMT, then, been restricted, revoked, denied, suspended, or explanation, and the suspended, or explanation.	No □ Iford plea to No □ dical vehicle? No □ in which you No □ AEMT, ired No □ affect No □ affect No □ ATEMT, ired No □ ATEMT, ired No □	Yes	
supplying false information on this ap therein. I further understand that m form. I agree to obtain the required b	provided on this application is complete and true to to pplication is a violation of KRS Chapter 311A and subjey application can be returned to me incomplete if I fai background check per requisite by the KY Board of EMS	iects me to the full rang iled to provide all info S and Nelson County E	ge of disciplinary action describe rmation requested on application	
Signature of Applicant		Date		

WASHINGTON COUNTY 126 Amory Hill

Springfield, KY 40069

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EMT Course Student Candidates:

Must be 18 years or older
Must have a Current Driver's License
Must pass a Background Check
Must have a High School Diploma or G.E.D

Class Information:

Hybrid EMT Course with Online and Classroom Components

Class Orientation August 5, 2024 6:30pm-9:00pm (required)

Class Starts August 12th, 2024

Class on Thursdays 5:30pm-9:30pm

Required to complete field internship

Course Cost: \$990.00 (All Fees Included)

Please Complete the Application on Page 2 and turn in NO LATER than August 2nd
You can hand deliver or mail the application to WCEMS Station (126 Armory Hill, Springfield, KY
40069)

or

email to emswashingtoncounty@gmail.com

*** LIMITED TO 21 STUDENTS; Entry Exam will be given on night of orientation***

Disclaimer: Submission of application does not guarantee acceptance into the course