

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 paramedic licensure in the state of California. I understand all information on this application is subject to verification, and I hereby give my express permission for the EMS Authority to contact any person or agency for information related to my role and function as a paramedic in California.

SIGNATURE OF APPLICANT _____ **DATE** _____
PHONE NUMBER: Home (____) ____ - _____ **Work** (____) ____ - _____
E-MAIL ADDRESS _____ **Cell** (____) ____ - _____

Out of State Paramedic Challenge Instructions/Requirements

- ✓ Fill in all requested information on the front and back of this application and sign and date the application in ink. All incomplete applications will be returned.
- ✓ Provide documentation that National Registration is current. (A copy of your National Registry Card will do.)
- ✓ Provide documentation of current or prior state paramedic licensure or certification (not mandatory for California State Licensure).
- ✓ For applicants whose paramedic training occurred outside of the country, provide a copy of paramedic training program completion record.
- ✓ Provide documentation of training hours that meet California requirements which includes: Didactic 320 hours, Clinical 160 hours, and Field Internship 480 hours which includes 40 Advanced Life Support (ALS) field contacts. If training hours do not meet California requirements, provide evidence that the training program meets or exceeds the U. S. Department of Transportation (DOT) paramedic curriculum or the National EMS Education Standards .(Not needed if you went to paramedic school in CA)
- ✓ Provide documentation that 40 ALS field contacts were included as part of initial training or you may submit a letter from an employer, training program, or medical director verifying that you have successfully completed 40 ALS field contacts through employment or other training. An ALS contact is the performance of one or more ALS skills, except cardiac monitoring and basic CPR, on a patient.(Not needed if you went to paramedic school in CA)
- ✓ Submit a completed Applicant Fingerprint Card (FD-258) for a state and federal criminal history check to the California Department of Justice (DOJ), or if you are already residing in California you may submit your fingerprints by using a Live Scan agency for submitting your fingerprints for the criminal background check. **Both a fingerprint card and a Request for Live Scan Applicant Submission form are enclosed with instructions, please read them carefully.**
- ✓ Submit pages 1 and 3 of the enclosed IS-01 form (Statement of Citizenship, Alienage, and Immigration Status) and submit it along with one piece of documentation as described on pages 4-8 of the IS-01 form, unless you were previously licensed in California and this documentation has already been submitted.
- ✓ Complete the top portion of the *Request for Verification of EMT-Paramedic Status* and send a copy to each state in which you are or were certified/licensed. Please have them complete the bottom portion of the form and return it directly to the Emergency Medical Services Authority at the address on the bottom of the form.
- ✓ Pay all applicable fees by check, money order or cashier's check, payable to the **EMS Personnel Fund**:

Initial Application Fee	\$100
Licensure Fee	\$195
State Licensing Match System (SLMS) Fee	<u>\$ 5</u>
Total	\$300

Individuals who are currently enrolled in a paramedic training program which meets or exceeds U. S. Department of Transportation standards or who are new paramedic training program graduates are not eligible to apply for licensure until they are registered as a paramedic with the National Registry of EMTs.