



Emergency Medical
Services
PO Box 47877
Olympia, WA 98504-7877

Emergency Medical Services Training Program County Council Signature and Recommendation Form

This signature page should be used to acquire local EMS council signature and recommendation when the Training Program is applying via website. You will be notified by email of any outstanding documentation needed to complete the process.

Application Instructions:

1. Training Program Information:

This signature page should be used to acquire local EMS council signature and recommendation when the Training Program is applying via website.

Note: You must be a department approved training program to conduct an EMS training course.

2. EMS Council recommendation and signatures:

The local EMS Council must review the application and provide answers to the questions provided. The Council Chair must then print and sign his or her name and enter the date. In the absence of a local EMS council, the regional EMS and trauma care council may provide such review. Submit all documentation and attachments with the application.

Note: This form is for use with online applications.

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

EMS Training Program

Local EMS & Trauma Care Council Chair Statement and Signature

Application for: Initial Application Renewal of Current Program Amendment of Current Program

1. Training Program Information (to be completed by Training Program Director)

Training Program Name

Training Program Credential Number (Ex: TRNG.ES.XXXXXXXXXX-PRO)

Email Address

Phone (enter 10 digit #)

2. Local Council Recommendation

For new programs, has the applicant demonstrated the need for a new or additional EMS Training Program in the are for the training levels indicated?
If no, attach an explanation.

Yes No N/A

Printed name of Local EMS Council Chair

Email Address

Phone Number

Signature of Local EMS Council Chair

Date (mm/dd/yyyy)