EMS # _____

Application for Initial Certification/Licensure

TYPE or PRINT in CAPITAL LETTERS. <u>All</u> sections of this application are required to be completed unless otherwise noted. Note: Any misrepresentation or omission may result in a denial of this application or revocation of certification/ licensure. Certification/licensure may be denied if you have a history of disciplinary action relating to a license, permit, designation, endorsement or certification in this or any other state.

	Check the level for which you are a $$ Check instructor endorsement, if a $$ Check additional endorsement, if a	applicable:	EMT AEMT Paramedic Secondary Primary Master Critical Care Paramedic Community Paramedicine AI/DM					
<u>Sec</u>	tion I - APPLICANT INFORMATION							
Las	t Name First Name		Middle Name		Social S	Security Number*		
* Di	sclosure of your social security number is	s mandatory und	er Nevada Revis	ed Statutes 45	0B.187			
List	List other names you have (e.g. alias, married/maiden, etc.)							
Mai	ling Address Apt. #		City	State		Zip		
Hor	ne Address	Apt. #	City		State	Zip		
(Mot) () bile Phone Home	Phone	Da	te of Birth		M / F (Circle one)		
Ema	ail Address:		_					
in S Fail adju	tion 2 – BACKGROUND (Per EMS Reg ections 2 & 3) ure to report any limitation, suspension a idication case information may result in c ertification or licensure (refer to pgs. 3 &	nd revocation of disciplinary action	a license and/or and/or denial of	any conviction	(s) and/or c	deferred		
1.	Can you speak, read and write the English language? 🗌 Yes 🗌 No							
2.	Have you ever been certified as an EMS provider in this state, or any other state? 🗌 Yes 🗌 No							
3.	Have you ever been licensed as an ambulance/firefighter attendant or air ambulance attendant? Yes No							
4.	Have you ever had an investigation/review of your EMS certificate/license? Yes No N/A							
5.	Have you ever surrendered any type of Yes No If Yes, provide an ex		cense in any stat	e that had issu	ied you a c	ertificate/license?		

6.	Have you ever been subject to limitation, suspension, or revocation of a certificate/license, including your right to practice in a healthcare occupation? Yes No N/A If "Yes" provide an explanation:								
7.	7. Have you ever been denied any type of certificate/license in any state by a state agency? Yes No If "Yes" provide an explanation:								
<u>Se</u>	ction 3 – CRIMINAL BACKGROUND								
1.	Have you ever received deferred adjudication for a felony or misdemeanor? Yes No (See back page for definition of "deferred adjudication")								
2.	Have you ever been convicted of a felony? Yes No								
3.	Have you ever been convicted of a gross misdemeanor? Yes No								
4.	Have you ever been convicted of a misdemeanor other than a minor traffic violation, e.g. speeding ticket or parking violation? (Driving while Under the Influence is <u>not</u> a minor traffic violation)								
	ou answered "Yes" to <u>ANY</u> questions above (4-7 in Section 2; 1-4 in Section 3), provide the date of action, state and agency ne, action taken and case number; you may use a separate piece of paper to provide an explanation.								
•	Indicate offense(s) committed and court case/cause number(s), if applicable:								
•	Date(s) of conviction(s) and/or deferred adjudication(s), if applicable:								
•	Sentence(s), if applicable:								
•	Fine(s), if applicable:								
•	City, County and State where offense(s) committed:								
<u>Im</u>	portant points to remember if you've ever been convicted of a crime:								

- Even if you have been told a conviction has been expunged, sealed, dismissed, dropped, closed, etc., it may still show up on your fingerprint report.
- You could have been convicted even if you didn't spend any time in jail.
- Criminal convictions include misdemeanors and felonies.
- If you answered "NO" to any of the questions in Section 3 above and the Office of EMS & Trauma System finds you have a conviction, your application may be denied as a fraudulent application.
- If you answered "YES" to any of the questions in Sections 2 & 3 above and do not attach the required documents, your application may not be considered by the Office of EMS & Trauma System until you provide the documents.

Required documentation checklist for felonies:

Letter of explanation of the circumstances surrounding the event(s)

Copy of court documents showing final disposition for all cases (i.e. arrest affidavit, probation documents, etc.)

Letter from Parole/Probation Officer regarding completion of sentence, if applicable

Reference letters if you wish to have them considered

Please note that it can take up to 12 weeks to complete the process of a criminal history investigation and make a final determination regarding eligibility for certification/licensure.

<u>Section 4 – MILITARY BACKGROUND</u> (Complete <u>only</u> if you are a military veteran)

1.	Branch of service:	Army	🗌 Navy	Marine Corps	Air Force	🗌 Coast Gu	lard
2.	Length of service:			3. Militar	y Occupational	Specialty:	

Section 5 – SIGNATURE AND DATE

I swear or affirm that all information on this application is true and correct. I agree and understand that any or omissions of material facts herein may cause forfeiture on my part of all rights to certification, recertification by the Southern Nevada Health District. Yes No	
I further attest to knowledge of and compliance with the guidelines concerning safe and appropriate injection set forth in NRS 450B.165. Yes No (Literature available upon request)	on practices as
I understand my obligation as a certified or licensed person providing medical services to report any finding neglect, or exploitation of children, elderly, or vulnerable persons within 24 hours from occurrence as set for 432B.220, NRS 200.5093, and NRS 200.50935. Yes No (Literature available upon request)	
Signature of Applicant: Date:	

Section 6 – CHILD SUPPORT INFORMATION

The Nevada Emergency Medical Services Statute, NRS 450B, was amended by passage of Senate Bill 356 by the 1997 Legislature. Senate Bill 356 provides that a Certificate or License as an EMS Attendant or Air Ambulance Attendant cannot be issued or renewed unless the applicant provides the following information.

Please place a check in front of the appropriate response. <u>Failure to mark one of the three will result in denial of the application</u>.

I am not subject to a court order for the support of a child;

- I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or
- I am subject to a court order for the support of one or more children and am **not** in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Applicant's Social Security No.:

Print Name

Applicant's Signature

Date

The use of information collected through this office shall be limited to the purpose of providing the service for which our clients have engaged us.

Section 7 – INFORMATION FOR COMPLETING SECTIONS 2 & 3

The Office of EMS & Trauma System may approve your application and may grant you a certificate/license:

- If you have a minor event, minor traffic-related incident(s), minor criminal citation(s), and/or juvenile offense(s) that occurred within 7 years prior to application; or
- If you have three minor event(s) that occurred between 7-10 years prior to application; or
- If you have multiple minor event(s) that occurred more than 10 years prior to application.

Note: A "minor event" is defined as any conviction that is **not** a felony or one of the eight convictions listed below:

The Office of EMS & Trauma System will deny your application if you have any of the nine convictions listed below:*

- Murder, voluntary manslaughter or mayhem;
- Assault with intent to kill, sexual assault or mayhem;
- Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime;
- Abuse or neglect of a child or contributory delinquency;
- A violation of federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in Chapter 454 of NRS, within 7 years prior to application;
- A violation of any provisions of NRS 200.5099 or 200.50955, which outlines abuse, neglect, and exploitation of an older person or vulnerable person;
- Any conviction resulting from Medicare or Medicaid fraud or abuse or other conviction resulting in exclusion or debarment from participation in a federal or state health care program.
- Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within 7 years prior to application.
- Any other felony involving the use of a firearm or other deadly weapon, within 7 years prior to application.
 - * After receiving written notice that the Office of EMS & Trauma System has denied your application, you can appeal the denial by sending a letter requesting a review by the Health Officer. This must be done within 30 days after the denial notice is mailed to you.

References:

Nevada Revised Statutes 450B, Nevada Revised Statutes 454, Nevada Administrative Code 450B, EMS Regulations, National Registry of EMT's Policy

Deferred Adjudication defined:

Deferred adjudication basically means that the final judgment in a situation has been deferred until a later time. Between the announcement of deferred adjudication and the time when final judgment will be announced, the charged individual is given the chance or opportunity to do something that will result in the crime not being listed as a "guilty" sentence on his or her record.

For many small or minor crimes, an individual who has maybe no prior arrests or convictions will be given the opportunity to keep his or her record clean through deferred adjudication. A judge will give an individual an opportunity to complete community service hours or an alcohol awareness class.

Deferred adjudication can be a plea bargain agreement between a defendant and the court. The final or formal judgment is withheld, postponed, or deferred until the end of a probation period. If the individual completes the probation period successfully, the charges are dismissed. In addition to the probation period, a person may have a number of conditions to meet that the court assigns.