

EMERGENCY MEDICAL TECHNICIAN (EMT-A) APPLICATION FORM

By PRS Hospital Accident & Emergency Department (PRS AED) Trivandrum &
Indian Institute of Emergency Medical Service, USA (IIEMS-USA)

Instructions to applicants:

Candidate for admission to **EMERGENCY MEDICAL TECHNICIAN (EMT-A)** shall be required to possess the following qualifications: (a) He/she must have a qualified Bsc /GNM Nursing (b) Obtained permanent registration certificate from any one of the State Nursing Councils.

The application forms should be accompanied with photocopies of the following documents:

1. Duly filled application form available in our website
2. 4 x passport size photographs
3. Curriculum Vitae
4. Registration Certificate
5. Experience Certificate if any
6. Course Completion Certificate
7. BLS, ACLS, PALS, ATLS certification if any
8. Age and Address Proof Certificate

- We have limited seats for these courses
- Admission will be based on the Interview & Screening exam
- Please attach additional sheets if required for CV
- Please go through the course details, rules and regulations clearly before filling the application form
- Visit our website 'www.intliems.org' for further clarification.
- Successful candidate list will receive certificate from IIEMS-USA and are eligible for writing **AREMT (Australasian Registration of Emergency Medical Technician)** exams

Personal Data Name: (first) (Middle) (Last): _____

Home Address: _____

Telephone (with country& local area code): _____

Email address: _____

Qualification: _____

Year of Passing: _____

Name of University: _____

Nursing council registration number: _____

Professional experience: Detail your experience placing the most recent first. Include final or current position

Publications / Presentations: _____

Current employer (Name of the Institution) _____

I have read the instruction manual for the students & I understand all the rules and regulations of this course and assure that I will comply with all of them. I also understand that this programme is under the purview of **Indian Institute of Emergency Medical Service, USA (IEMS-USA)** only and not under purview of Nursing council in India or abroad. Successful candidate should renew certificate every 5 years.

Signature of the candidate: (Name & Date)

FOR OFFICIAL USE ONLY:

- ❖ Approved by (Signature and stamp of the Head of the department):

- ❖ Application: Accepted / Rejected _____
- ❖ Batch / Year of joining: _____
- ❖ Entitled to take exam on or after: _____
- ❖ Institution: _____
- ❖ Approving Authority (Signature with stamp):

