



EMERGENCY MEDICAL SERVICES LICENSURE APPLICATION GEORGIA OFFICE OF EMERGENCY MEDICAL SERVICES AND TRAUMA

GA-EMS 1000

PERSONNEL INFORMATION

Name of Service(s):		License Number(s):			License Type: Location(s):			
				First Responder				
					Ground			
					Neonatal			
					Air Ambulance			
Full Name	Level of	Geo	rgia	Georgia	Employment	CPR	ACLS	
(As it appears on Georgia License)	Licensure	Lice		License	Status	Expiration	Expiration	
	EMT-I-A-CT-P	Num	nber	Expiration		Date	Date	
	or OTHER			Date				
		SIGN	ATURES	3				
Owner's Name:				Authorized Agent's Name:				
Signature & Date:			Signature & Date:					