SC 2160101  All students MUST attend the first day of class. No exceptions, no accommodations!

COUNTY OF SUFFOLK - DEPARTMENT OF HEALTH SERVICES - EMS DIVISION

Emergency Medical Responder (EMR) Original Course

LOCATION: Islip Terrace Fire Department
264 Beaverdam Road, Islip Terrace, NY 11752

INSTRUCTOR: Audrey Watson-Wigley

DATES: 3/19/16 to 5/19/16  DAYS/TIMES: Saturdays 8:30am to 3pm/4pm, all classes are mandatory.

SKILLS FINAL: Approx. Saturday 5/14/16 8:30 am at the Suffolk County EMS Division, 360 Yaphank Ave.,
Yaphank, NY 11980

WRITTEN FINAL: Thursday 5/19/16 7pm  FEE: $90.00 for EMS Personnel  $350.00 for NON EMS

STUDENTS MUST BE 16 YRS OLD BY THE MONTH OF THE NYS WRITTEN EXAMINATION.

Students must have their own notepads and writing tools. **No walk in students will be allowed**

Pre-requisites: FEMA NIMS 100, NIMS 700 and HazMat Awareness – OSHA Compliant minimum 3 hours. (FEMA links will be emailed to students with the confirmation email, if students haven’t already taken those classes.) Firefighter 1 AFTER 2003 will count for HazMat Awareness, must show proof. (All HazMat Awareness classes MUST have been taken after 9 11 to count.) Copies of certificates must be handed in to the instructor within the first month of the course.

To reserve seating for this course: Complete this form with check(s)/money order(s) payable to the Suffolk County EMS Division (please postdate check(s)/money order(s) to the start date of the course). Please mail to: Suffolk County EMS Division, 360 Yaphank Ave., Suite 1B, Yaphank, NY 11980, Attn: EMR Course. Per County Resolution #968-1997, there will be an additional $25 fee added to the cost of the course for any checks returned with notice of “insufficient funds.” NO SEATS WILL BE HELD UNLESS FULL PAYMENT IS RECEIVED.

Please note: Forms will be returned if incomplete, illegible, or if the course is full or canceled. No seats will be held unless the registration process is complete. You will receive a confirmation email. Please make sure you include your email address in the box below. If you do not have an email address, please make sure your mailing address is listed on the check. You will receive a confirmation letter in the mail. Enrollment is first come, first served.

Please be advised, the Suffolk County EMS Division will be handing out CDs with all of the New York State and Suffolk County policies, protocols and various other vital information.

### Application Form

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<th>SC 2160101</th>
<th>EMR ORIGINAL Course</th>
<th>Islip Terrace Fire Department</th>
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<td>N.Y.S. EMS AGENCY CODE #</td>
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This is to certify that the individuals identified above are members of this EMS Agency.

Officer (Print Name) ___________________________ Date ___________ Title __________________

Signature ______________________________________ Phone # (daytime) __________________

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