

Central California Emergency Medical Services Agency

A Division of Fresno County Department of Public Health

PARAMEDIC CERTIFICATION CHECKLIST

- **D** PARAMEDIC Certification Application Form
- □ Letter of Employment
- **Copy of STATE PARAMEDIC card**
- □ Copy of current cardio-pulmonary resuscitation (CPR) card American Heart Association, Healthcare Provider or Red Cross-Professional Rescuer (front & back)
- □ Copy of current advanced cardiovascular life support (ACLS) card American Heart Association, Healthcare Provider or Red Cross-Professional Rescuer (front & back)
- □ Copy of current Prehospital Trauma Life Support (PHTLS) American Heart Association, Healthcare Provider or Red Cross-Professional Rescuer (front & back)
- **D** Copy of valid Driver's License
- □ PARAMEDIC Certification Fee \$48.00 (Make checks payable to Fresno County Treasurer 1694)
- □ Picture A passport size picture can be included, or E-mail a JPG photo from a digital camera to <u>ccemsa@fresnocountyca.gov</u>

PARAMEDIC RECERTIFICATION CHECKLIST

- **D** PARAMEDIC Certification Application Form.
- □ Copy of STATE PARAMEDIC card
- □ Cop Copy of current cardio-pulmonary resuscitation (CPR) card American Heart Association, Healthcare Provider or Red Cross-Professional Rescuer (front & back)
- □ Copy of current advanced cardiovascular life support (ACLS) card American Heart Association, Healthcare Provider or Red Cross-Professional Rescuer (front & back)
- □ Copy of current Prehospital Trauma Life Support (PHTLS) American Heart Association, Healthcare Provider or Red Cross-Professional Rescuer (front & back) (only if not on file)
- Copy of valid Driver's License
- □ PARAMEDIC Recertification Fee \$48.00 (Make checks payable to Fresno County Treasurer 1694).
- □ Picture A passport size picture can be included, or E-mail a JPG photo from a digital camera to <u>ccemsa@fresnocountyca.gov</u>

The Local Emergency Medical Services Agency for Fresno, Kings, Madera, and Tulare Counties 1221 Fulton Mall/ PO Box 11867/ Fresno, California, 93775/ Phone (559) 600-3387/ FAX (559) 600-7691 After Hours Phone (559) 456–7838 E-Mail: <u>ccemsa@co.fresno.ca.us</u> Website: <u>www.ccemsa.org</u> Equal Opportunity Employer – Affirmative Action