



Kitsap County EMS & Trauma Council

EMS Evaluator Initial & Refresher Course

EMS Training Application

Class applying for 2022 EMS EVALUATOR INTIAL AND REFRESHER COURSE

Student Name (*First, Middle Initial, Last*) _____

EMS Credential number: _____

Contact Phone: _____ Email: _____

I wish to attend the course as: Initial Course Refresher Course

I wish to attend: March 15th May 18th September 14th

- **ACCEPTANCE OF FINANCIAL RESPONSIBILITY: (Signature Required)**

Cost: \$60 per student

Billing email: _____

Responsible party for payment Signature (required) _____

FEE FOR CLASS IS NON-REFUNDABLE AFTER DEADLINE WHETHER OR NOT THE STUDENT ATTENDS THE CLASS. (Initial) _____

*Invoices will be sent to the above email the day after the deadline.

To complete the application student must acknowledge the following:

YES	NO	
		I have the physical ability to perform the skills station
		I have completed at least one certification cycle (3years)- if no, please fill out a request for variance.
		I am a current EMS Evaluator taking this class as a refresher course. I have taken the DOH ESE online cognitive evaluator survey located on the DOH website and attached my survey to the application. (proof attached)
		I am a current EMS Evaluator, and I will be taking this entire 8 hour course. (Do not have to take the DOH test.)
		I understand the fee is nonrefundable, whether I attend the class or not.

Chief or Training Officer

Date

Student Signature

Date



Kitsap County EMS & Trauma Council

EMS Evaluator Initial & Refresher Course

EMS Training Application

<u>Date</u>	<u>Instructors</u>	<u>Location</u>	<u>Time</u>	<u>Deadline</u>
March 15, 2022	Joe Schweiger	Central Kitsap Station 4-1	900 AM until completed.	February 15th
May 18th, 2022	Joe Schweiger	Central Kitsap Station 4-1	900 AM until completed.	April 18th
Sept 14, 2022	Joe Schweiger	Central Kitsap Station 4-1	900 AM until completed.	August 15th

Students: Any BLS provider who has done 1 recertification period OR any previous BLS Evaluator who wants to re-certify their credential.

What to know:

1. Students will need to bring their own working lunch and snacks.
2. Students must follow all current COVID restrictions.
3. If you are a current evaluator **AND you want to do this as a half-day refresher course**, then you must review the ESE curricula and take a survey:
 - a. Download ESE curricula online at <https://www.doh.wa.gov/Portals/1/Documents/Pubs/530213.pdf>;
 - or
 - b. Download the ESE PowerPoint online at EMS Evaluator Information: Washington State Department of Health; <https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/EmergencyMedicalServicesEMSSystems/EMSEducationandTraining/EMSEvaluatorInformation>
- AND**
- c. Take the ESE online cognitive evaluator survey located on the DOH website at <https://fortress.wa.gov/doh/opinio/s?s=EMSEvaluator>

If you don't wish to do complete the above curricula and survey, you will need to attend both sessions.

4. Proof of completion of DOH course either by screen shot or certificate **MUST** be attached to application, **IF attending as a refresher course**.
5. All payments will be sent through Kitsap County EMS Quick books. Payments will be deducted once the class is determined to commence. **FEE FOR CLASS IS NON-REFUNDABLE AFTER DEADLINE WHETHER OR NOT THE STUDENT ATTENDS THE CLASS.**

Student Signature

Date



Kitsap County EMS & Trauma Council EMS Evaluator Initial & Refresher Course EMS Training Application

The class must have **9** students registered at the time of deadline to commence with a max of **20** students due to COVID restriction. We will adapt the max number according to the current COVID restrictions and building location at time of deadline. If you have an alternative date which is acceptable, please put it down as you might be able to get into another class.

Send applications to Tamarah Hoffman at training @kitsapcountyems.org