



State of Louisiana

Department of Health and Hospitals
Bureau of Emergency Medical Services

INSTRUCTIONS FOR THE EMT EXAM APPLICATION

Bureau of EMS, 1001 Perdido Street, Suite A, Baton Rouge, LA 70804

APPLICATIONS WILL BE RETURNED FOR THE FOLLOWING REASONS:

- Application not filled out completely (including signature of Instructor)
- Student not registered and verified successful completion of course in National Registry website
- Copies of required documentation not submitted
- Payment not in the form of money order or cashier's check
- Incorrect payment

EMT-Basic

➤ Initial Practical	\$60.00
➤ Retest entire practical	\$30.00
➤ Partial practical	\$15.00

EMT-Intermediate

	Instate	Out of state
➤ Initial Practical	\$75.00	\$100.00
➤ Retest entire practical	\$50.00	\$65.00
➤ Partial practical	\$30.00	\$30.00

EMT-Paramedic

	Instate	Out of state
➤ Initial Practical	\$90.00	\$125.00
➤ Retest entire practical	\$60.00	\$75.00
➤ Partial practical	\$35.00	\$40.00

RESERVATIONS: Will be accepted on a first-come-first-serve basis. Applications received after the maximum number has been reached for the most recent exam date, will be scheduled for the next available exam. Incomplete applications will be returned to the applicant.

NO SHOWS: Failure to appear at the exam as scheduled will forfeit all fees submitted for exam. As stated on Examination Application, exam fees are **non-refundable** once you have been scheduled. These individuals must re-submit an Examination Application for entry in future exams.

EXAM RESULTS: The Bureau of EMS Exam Coordinator or the National Registry Representative will notify each candidate of the results of their practical exam the day you complete that practical exam. Results will then be processed and mailed to National Registry or entered in National Registry website within 1 week of exam.

COMPUTER TESTING: The National Registry has now established the Computer Based Testing. Please go to NREMT.org for assistance in scheduling your CBT online with Pearson/Vue.

All candidates must have a current state Driver's license or other form of official identification in hand when registering for the exam.

LOUISIANA BUREAU OF EMERGENCY MEDICAL SERVICES

EXAMINATION APPLICATION

EMT-Basic EMT-Intermediate EMT-Paramedic Initial Exam Retest

Date Money Order* \$ SS#

Last Name First Name MI

Mailing Address Apt #

City State Zip

Phone Email

CPR Provider CPR Expiration Date

Course # Course End Date Program Code

Program Name

Course Instructor

Course Medical Director License # State

LIST REQUIRED RETEST PRACTICAL SKILL (S)

Must take all practical skills

**Attach Copy of
Driver's License
Photo Must Be Legible**

STATEMENT OF COURSE COMPLETION AND COMPETENCY OF PRACTICAL SKILLS

As a Louisiana State Certified EMS Instructor, I hereby affirm and declare that _____
(Candidate's Name) is in good standing and has successfully completed a Louisiana Bureau of EMS state approved course.
I also verify that the above individual has been examined and performed satisfactory all practical skills for the above certification level. This student has registered with NREMT.org and completion of course has been verified in the National Registry website.

Print Course Instructor

Signature

Date

**ALL EXAMS ARE SCHEDULED ON A FIRST-COME FIRST-SERVE BASIS.
APPLICATION MUST BE RECEIVED A MINIMUM OF 3 WEEKS PRIOR TO EXAM DATE.**

I hereby affirm and declare that the above information on this application is true and correct and that any fraudulent entry may be considered a sufficient cause for rejection or subsequent revocation. I further agree to abide by all polices and procedures of the National Registry of EMTs and the Louisiana Bureau of EMS, and hereby authorize the Louisiana Bureau of EMS to release my examination scores to the teaching institution/agency, any state office of EMS, or any agency authorizing the legal right to practice.

I am enclosing a money order for the total amount of fees listed on the instruction page. The money order is made payable to "Bureau of EMS" or "BEMS." I understand that once I am entered into the examination process these funds are non-refundable. I am also affirming that I am sound physical condition and can perform all skills required without restriction. If I have been under a physician care within the last 90 days, I am including a letter from that physician attending to my physical condition as above.

Candidate Signature *Application VOID if not signed by candidate

***ATTACH A COPY OF AGENCY/TEACHING INSTITUTION CERTIFICATE OF COMPLETION**

STATE OF LOUISIANA

EMS CERTIFICATION COMMISSION

Examination Disclosure Form

In accordance with La. R.S. 40:1232.3 et seq., the Louisiana Bureau of EMS Certification Commission is required to make a determination regarding the eligibility of each applicant for EMT certification, reinstatement, or the right to practice as an EMS student. The eligibility determination process requires that each applicant submit certain information.

If you are applying for EMT certification, reinstatement, or the right to practice as an EMS student, you must complete and submit this Disclosure Form. You must answer each question truthfully and completely. Failure to disclose or correctly answer these questions constitutes falsification of documents and may result in denial or delay of certification.

For purposes of this disclosure, a pardon, suspension of sentence, expungement, or pretrial diversion or similar program shall not negate or diminish the requirements for your truthful compliance. In other words, if you have ever been arrested, summonsed, charged, or convicted, you should mark "yes" regardless of what the outcome was. For purposes of this section, a charge of driving while under the influence of any alcohol or other substance is not considered a traffic violation. You are not required to report misdemeanor traffic violations

If you mark "yes" to any of the following questions, you are obligated to provide the following documentation to the Certification Commission:

- 1. Narrative which details all circumstances surrounding the event, original document with original signature no copies or fax
2. Copy of official documents including arrest reports, court documents, probation forms, physician statements, etc., and any/all other relevant records

All required documentation must be provided to the EMS Certification Commission within the first 30 days of EMS course. You may not enter into the clinical sequence of the EMS program, or otherwise test or certify as an EMT until your eligibility has been determined by the EMS Certification Commission.

You should report any subsequent arrest, criminal charge or conviction, addiction, or impairment, to the EMS Certification Commission.

All correspondence must be submitted to the Bureau of EMS'EMS Certification Commission. If you have any questions regarding the EMS Certification Commission, you may contact'g'Dwtgcw'qh'GO U

Please read each question carefully.

Table with 3 columns: Question Number, Question Text, Yes, No. Contains 6 questions regarding criminal history, court orders, license status, medical conditions, and substance use.

I hereby affirm that all answers provided on this form are true and correct, including all correspondence and documentation submitted in connection to the EMS Certification Commission. I understand that falsification of any documents submitted to the bureau or commission is a violation of R.S. 40:1232.6, and is a ground for disciplinary action including delay or denial of your application.

EMT Applicant Signature

Date