OFFICIAL OEMS ATTENDANCE ROSTER

DATE		
TIME(S)	TO	
TITLE		
SPONSOR		
INSTRUCTOR		

OEMS APPROVAL NUMBER

l	*HOURS APPROVED
1	BASIC
Ì	INTERMEDIATE
Ì	PARAMEDIC

COURSE SPONSOR OR LEAD INSTRUCTOR

- 1) Provide copy of official OEMS Approval Notice to EMT's when course is held.
- 2) Provide complete and accurate information in the spaces above.
- 3) Report in writing any changes to length, content, times, dates, etc to OEMS.
- 4) Notify attendee's of actual number hours program is approved for versus total length of program.
- 5) Sign this roster in space(s) provided attesting to conduct of this course in accordance with application and outline submitted to and approved by OEMS.
- 6) Forward original attendance roster(s) directly to MDPH/OEMS no later than five (5) working days after completion of program.

***EMT'S ATTENDING PROGRAM**

- 1) Check and record all information listed at top of this roster for your records. <u>Review for accuracy and report any discrepancies to OEMS.</u>
- 2) Legibly PRINT and SIGN your name after your six digit MA EMT number attesting that you attended course as described above.*
- 3) Review official OEMS approval notice to check that program is approved and the actual number of credit hours awarded.

4) Any program lacking an official OEMS Approval number may never receive credit. Attendance is at your own risk!

FAILURE TO SIGN THE ATTENDANCE ROSTER MEANS THAT NO CREDIT CAN BE AWARDED.

Note: Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct and actual attendance for this training course. Signature of Course Sponsor or Instructor _____

MA EMT NUMBER	PRINT NAME	SIGNATURE (*see EMT's #2 above)
1.		

OFFICIAL OEMS ATTENDANCE ROSTER

OEMS APPROVAL NUMBER

(SEE INSTRUCTIONS ON OTHER SIDE)

MA EMT NUMBER	PRINT NAME	SIGNATURE

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{)}$ mark. Session(s) not attended should be marked with a (-) or (o). Enter written and practical exam grades in slots provided and enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or failed the written and/or practical examinations.
- 5. Sign the Master List and Attendance Rosters attesting to the fact that the course was held as submitted to and approved by OEMS. Send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

EMT-BASIC REFRESHER COURSE

COURSE SPONSOR:

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct of and actual attendance for this training course:

Signature of Lead Instructor or Course Coordinator

NOTE: Successful completion requires attending all mandatory topics and sessions, and passing written and practical exams in the minimum 24 hours.

DATES OF SESSIONS

EMT NUMBER	NAME (print or type)						PRACTICAL GRADE	WRITTEN GRADE	TOTAL HOURS
1.									noens
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									
18.									
<u>19.</u>									
20.									

MASTER ATTENDANCE LIST FOR EMT-PARAMEDIC REFRESHER

OEMS APPROVAL NUMBER

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{)}$ mark. Session(s) not attended should be marked with a (-) or (o). Enter written and practical exam grades in slots provided and enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or failed the written and/or practical examinations.
- 5. Sign the Master List and Attendance Rosters attesting to the fact that the course was held as submitted to and approved by OEMS. Send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

EMT-PARAMEDIC REFRESHER COURSE

COURSE SPONSOR:

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct of and actual attendance for this training course:

Signature of Lead Instructor or Course Coordinator

NOTE: Successful completion requires attending all mandatory topics and sessions, and passing written and practical exams in the minimum 48 hours.

DATES OF SESSIONS PRACTICAL WRITTEN GRADE GRADE TOTAL HOURS **EMT NUMBER** NAME (print or type) 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20.

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session. 2.
- Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided 3. and enter attendance for each session with an (X) or ($\sqrt{1}$) mark. Session(s) not attended should be marked with a (-) or (o). Enter written and practical exam grades in slots provided and enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or failed the written and/or practical examinations.
- Sign the Master List and Attendance Rosters attesting to the fact that the course was held as submitted to and approved by 5. OEMS. Send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

EMT-I ADD-ON REFRESHER COURSE

COURSE SPONSOR:

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct of and actual attendance for this training course:

Signature of Lead Instructor or Course Coordinator

NOTE: Successful completion requires attending all mandatory topics and sessions, and passing written and practical exams in the minimum 12 hours. DATES OF SESSIONS

DATES OF SESSIONS											
NAME (print or type)									PRACTICAL GRADE	WRITTEN GRADE	TOTAL HOURS
	NAME (print or type)									RACTICAL	RACTICAL SRADE SRADE SRADE SRADE

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{)}$ mark. Session(s) not attended should be marked with a (-) or (o). Enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or otherwise failed to successfully complete all program requirements.
- 5. Sign the Master List and Attendance Rosters attesting to the fact that the course was held as submitted to and approved by OEMS. Send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

PROGRAM TITLE:

COURSE SPONSOR:

Under the pains and penalties of perjury, I attest that this is a true and accurate record of the conduct of and actual attendance for this training course:

Signature of Lead Instructor or Course Coordinator

DATES OF SESSIONS

NOTE: Successful completion requires attending all mandatory topics and sessions. Original attendance rosters must accompany this Master List.

	DATES OF SESSIONS											
EMT NUMBER	NAME (print or top o)									PRACTICAL GRADE	WRITTEN GRADE	TOTAL HOURS
EMT NUMBER	NAME (print or type)										, -	HOURS
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												
11.												
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18.												
19.												
20.												
21.												
9/2000			•	•	•	•						