



## Emergency Medical Technician (EMT) Reciprocity Application

# EMT Reciprocity Application Instructions

**PLEASE NOTE:** *If you have been trained by an EMS system in Illinois and have taken the National Registry exam, you do not need to apply for reciprocity. The EMS system coordinator for the system where you were trained needs to submit a transaction card to the attention of the Testing and Licensure Section at the address below. Reciprocity is only for those who have not received training in Illinois.*

In order to obtain Illinois reciprocity:

1. Complete Part I of the EMT Reciprocity Application.
2. Attach photocopies of your EMT certificate or license and current American Heart Association Healthcare Provider CPR card or equivalent.
3. Provide a letter from the EMS medical director indicating that you are in good standing and up-to-date with continuing education hours if you currently participate in an EMS system under an EMS medical director. If you cannot obtain a letter of recommendation, you will need to request a waiver as described in item 5.
4. Complete the child support declaration statement including your Social Security number, drivers license number, and return with the application and other required documents.
5. If you have not functioned as an EMT or under the direction of an EMS medical director, include a letter with your signature stating that you have never worked as an EMT or under an EMS medical director and request that the letter of recommendation be waived. This letter must include an explanation of why you are unable to obtain the letter of recommendation.

Send the application and all requested documents in one envelope to:

Illinois Department of Public Health  
Division of Emergency Medical Systems and Highway Safety  
Attention: Reciprocity  
500 E. Monroe St., Eighth Floor  
Springfield, IL 62701

An Illinois EMT license will be mailed to you after verification that you have met all the requirements for licensure. If you have any questions, please call 217-785-2080, or send an e-mail to: [DPH.MAILUS@illinois.gov](mailto:DPH.MAILUS@illinois.gov).

**Once you have been issued an Illinois EMT license you must adhere to Section 515.590 EMT License Renewal, of the Illinois Emergency Medical Services and Trauma Center Code (77 Ill. Adm. Code 515.590).**



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### Part I: This section is to be completed by the applicant.

Use your legal name

\_\_\_\_\_  
First Name                      Middle Name                      Last Name                      Suffix

\_\_\_\_\_  
Home Address                      City                      State                      ZIP Code

\_\_\_\_\_  
Home Phone#                      E-mail                      Date of Birth

\_\_\_\_\_  
EMT License Number                      Issuing State/Agency

#### Level of EMS license requested for reciprocity

EMT-Basic                       EMT-Intermediate                       EMT-Paramedic

### Part II: To be completed by the Emergency Medical Services licensing agency

The above named emergency medical technician has applied for an Illinois license through reciprocity based upon licensure from your state. Please verify or correct the above information and provide answers for the following questions.

1. Has the above named applicant been revoked or suspended in your state?  
 Yes (provide an explanation on a separate sheet of paper and attach)                       No
2. Has the course of instruction met or exceeded Department of Transportation National Standard Curriculum guidelines?  
 Yes                       No (provide an explanation on a separate sheet of paper and attach)
3. Is there any known reason why licensure in Illinois should be denied?  
 Yes (provide an explanation on a separate sheet of paper and attach)                       No
4. The above named applicant currently possesses an EMS license/certificate issued from our office as:  
 EMT-Basic                       EMT-Intermediate                       EMT-Paramedic

Number of test attempts by the above named EMT for National Registry \_\_\_\_\_

EMT License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

#### Person Completing Part II

Name \_\_\_\_\_ Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone Nos. \_\_\_\_\_ Date \_\_\_\_\_



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### Child Support Declaration

Under Illinois law, the Illinois Department of Public Health also must ask you to select one of the following choices regarding child support and sign this declaration. The Department will **be unable to process your application until a signed, completed statement is received**. This information is required of **ALL** applicants, regardless of whether the applicant has ever been ordered to pay child support. If issues of court-ordered child support do not apply to you, check the third statement: "I do not have to pay child support."

I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT:

- I AM UP-TO-DATE WITH CHILD SUPPORT PAYMENTS
- I AM MORE THAN 30 DAYS DELINQUENT IN COMPLYING WITH A COURT-ORDERED CHILD SUPPORT ORDER
- I DO NOT HAVE TO PAY CHILD SUPPORT

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Failure to so certify shall result in the denial of the request for reciprocity. Making a false statement shall subject the applicant to contempt of court [5 ILCS 100/10-65(c)].

### Required Information

Date of Birth:

\_\_\_\_\_  
Month

\_\_\_\_\_  
Day

\_\_\_\_\_  
Year

Driver's License #: \_\_\_\_\_

Social Security #: \_\_\_\_\_



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# Relicensure Process for Illinois Reciprocity Recipients

### IMPORTANT INFORMATION

**Please note that your initial Illinois EMS license may not be valid for a full four years.** The expiration/lapse date should coincide with your National Registry or other state license submitted to obtain Illinois reciprocity. When your Illinois license is due to expire, you will need to renew your license and not reapply for reciprocity. Illinois law only allows for reciprocity once.

Illinois requires 120 hours of approved continuing education in a four-year period. When you renew your license for the first time after reciprocity, the number of hours needed for renewal is prorated to the amount of time you held your initial Illinois license. The number of continuing education hours calculates out to 2.5 hours per month of licensure. Below is a sample chart:

Months of Licensure	Hours of Continuing Education	Months of Licensure	Hours of Continuing Education
3	7.5	27	67.5
6	15	30	75
9	22.5	33	82.5
12	30	36	90
15	37.5	39	97.5
18	45	42	105
21	52.5	45	112.5
24	60	48	120

Renewal is processed through your Illinois Resource Hospital if you function with an EMS provider. If you are not practicing in Illinois at the time of your renewal, then you will need to apply for an independent renewal through the Illinois Department of Public Health.