



EMS Reinstatement Certification Application

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Application for: EMR EMT AEMT

Click inside this box to insert recent photo of applicant here.

Acceptable file types: pdf, jpg, JPEG, png.

(If manually affixing a photo, use tape only)

DO NOT STAPLE

INSTRUCTIONS:

- 1. Complete this application. (fields outlined in red are required.)
2. Print a copy for your records by clicking the "print form" button at the bottom of this form.
3. Submit to OEMS by clicking the "submit form" button at the bottom of this form, which will open a new email window. Enter the course approval number and applicant's last name in the subject line of the email (example: 17-12345/Smith).

NOTE: Application processing time is 4-6 weeks from the time we receive the final required documentation, which includes the course completion paperwork your instructor must also submit. OEMS cannot process an application until we receive all paperwork.

Form with fields for: First Name, MI, Last Name, Maiden Name, Social Security number, Email address, Mailing address, City, State, Zip Code, Telephone Number, Cell Number, Male, Female, Date of Birth, Ethnicity, Race, Certification history questions, and Attestation section.