

ALS prehospital service provider agencies are responsible for the following:

- Verifying their paramedic personnel have a current and valid S-SV EMS accreditation prior to allowing them to practice independently as a paramedic in the S-SV EMS region.
- Verifying the renewal/maintenance status of their accreditation on an ongoing basis.

ALS provider agency:	
Name of person completing this form:	
Status change effective date:	
Paramedic name:	Paramedic license #:
Applicable Status Change	
\Box Has been hired as a paramedic by our organization	
\Box Is no longer functioning as a paramedic with our organization	
\Box Is no longer employed as a paramedic by our organization	
\Box Other (please explain in the comments section below)	
Comments:	

Submit Completed Forms to the S-SV EMS Agency (info@ssvems.com)