## **REQUEST FOR TEMPORARY RECOGNITION OF OUT-OF-STATE EMS** PERSONNEL RESPONDING ON MUTUAL AID IN CALIFORNIA

(Print or type all information, Use additional forms as necessary)

Out-of-state EMS personnel must obtain authorization from the Local EMS Agency (LEMSA) where they will be working before they may practice in California. Under California Law, out-of-state EMS personnel who have received authorization may utilize the scope of practice for which they have been licensed/certified.

Authorization for temporary recognition is requested for the following medical personnel assigned to:

INCIDENT: \_\_\_\_\_\_ in the COUNTY(s) of: \_\_\_\_\_

under the jurisdiction of the following LEMSA(s):\_

beginning	on	and ending on	KKI	
beginning	011 6			
	Full Name	EMT Level	Certification/	
		(circle)	License #	Issuing Agency
1		Basic /		20
1	<u> </u>	Paramedic		0.
2	6	Basic /		
2		Paramedic		
3	>	Basic /		G
5	5	Paramedic		
4		Basic /		
4		Paramedic		
5	U	Basic /		
5		Paramedic		0
6		Basic /		
0	100	Paramedic		71
7	LL.	Basic /		
1	6	Paramedic		
8		Basic /		
0	U.	Paramedic		
9		Basic /		
3		Paramedic		

## I attest that I have physically examined the certification/licenses of the above individuals.

		ALIEOR	Telephone	
Medical Unit Leader - Print		Agency	Fax	
Signature			Date	

			Telephone	
Medical Director - Print		LEMSA	Fax	
Signature			Date	