

NAME – Please print within the box (Last, First, M.I.)

CERTIFICATION NUMBER

A	0	0	0	0	0	0	0	0	0	0
B	1	1	1	1	1	1	1	1	1	1
C	2	2	2	2	2	2	2	2	2	2
D	3	3	3	3	3	3	3	3	3	3
E	4	4	4	4	4	4	4	4	4	4
F	5	5	5	5	5	5	5	5	5	5
G	6	6	6	6	6	6	6	6	6	6
H	7	7	7	7	7	7	7	7	7	7
I	8	8	8	8	8	8	8	8	8	8
J	9	9	9	9	9	9	9	9	9	9

LEVEL

A	0	0	0	0
B	1	1	1	1
C	2	2	2	2
D	3	3	3	3
E	4	4	4	4
F	5	5	5	5
G	6	6	6	6
H	7	7	7	7
I	8	8	8	8
J	9	9	9	9

COURSE NUMBER

0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

CAT

0	1	2	3	4	5	6	7	8	9
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TOPIC

0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

DATE OF CLASS

MONTH	DAY	YEAR
0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

CP92-0230 (C1,F3) Printed in U.S.A.

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|----|---|---|---|---|---|----|---|---|---|---|---|
| 1 | A | B | C | D | E | 19 | A | B | C | D | E |
| 2 | A | B | C | D | E | 20 | A | B | C | D | E |
| 3 | A | B | C | D | E | 21 | A | B | C | D | E |
| 4 | A | B | C | D | E | 22 | A | B | C | D | E |
| 5 | A | B | C | D | E | 23 | A | B | C | D | E |
| 6 | A | B | C | D | E | 24 | A | B | C | D | E |
| 7 | A | B | C | D | E | 25 | A | B | C | D | E |
| 8 | A | B | C | D | E | 26 | A | B | C | D | E |
| 9 | A | B | C | D | E | 27 | A | B | C | D | E |
| 10 | A | B | C | D | E | 28 | A | B | C | D | E |
| 11 | A | B | C | D | E | 29 | A | B | C | D | E |
| 12 | A | B | C | D | E | 30 | A | B | C | D | E |
| 13 | A | B | C | D | E | 31 | A | B | C | D | E |
| 14 | A | B | C | D | E | 32 | A | B | C | D | E |
| 15 | A | B | C | D | E | 33 | A | B | C | D | E |
| 16 | A | B | C | D | E | 34 | A | B | C | D | E |
| 17 | A | B | C | D | E | 35 | A | B | C | D | E |
| 18 | A | B | C | D | E | 36 | A | B | C | D | E |

**OFFICE OF EMS
VA. DEPT OF HEALTH
1041 TECHNOLOGY PARK DR.
GLEN ALLEN, VA 23059
1-800-523-6019**

INSTRUCTIONS

This is your EMS Continuing Education (CE) Registration Card. A separate card should be used for each class or course you attend in order to receive CE Hour (CEH) credits. All courses and classes approved for CE hours by the Office of EMS will be assigned a course number. The completed CE Card must be returned to the Office of EMS to receive credit hours toward recertification.

To complete the Continuing Education Registration Card:

- 1) You must use a #2 leaded pencil.
- 2) Make no stray marks on the card.
- 3) Print your name in the box labeled "Name" at the top of the card.
- 4) Place your Certification Number, Course Number and Topic Number so that each number is placed in a box under the appropriate heading. Blacken the corresponding number in each column.
- 5) Place your level of training in the box under the "Level" heading.
A=FR B=EMT C=Not used D=Not used
E=P F=EEMT-INST G=ALS-C H=Not used
I=Intermediate J=Enhanced
Mark only one box.
- 6) Complete the "CAT." (category) column listing the area you wish the CEHs to be applied.
1=Required 3=Multimedia
2=Approved 6=EEMT Instruction
- 7) Complete "Date of Class" indicating when you completed this particular program. Darken the appropriate areas.
- 8) The numbered rows on the right hand side of the card are used to answer test questions, if required, for the Multimedia category.
- 9) Notify Office of EMS of any change in Name or Address
- 10) Do not fold or bend.