

## **Eastern PA EMS Council**

## EMS-Instructor Candidate Tracking Form

| Candidate Name:                    | Certification number:   |  |
|------------------------------------|---|--|
| Instructions: This tracking form v | vill be utilized to track monitored instruction time for instructor candidates who  |  |
| completed the 40 hour EMS Insti    | uctor Class. After successful completion of instructor course this form is utilized |  |

completed the 40 hour EMS Instructor Class. After successful completion of instructor course this form is utilize to track and submit 20 hours of supervised instruction time - monitored by a certified PA EMS Instructor designated by the EMS Educational Institute's Administrative Director. Instruction time must occur in an EMS Certification Class.

| Date | Hours<br>Assisted | County | Module Instructed-Course Code | Supervised by | County<br>Coordinator<br>initials |
|------|-------------------|--------|-------------------------------|---------------|-----------------------------------|
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The County Coordinator, by initialing above, verifies that the EMS-Instructor candidate completed the above noted hours. Evaluations for each of the above noted sessions should be attached to this form and sent to the Eastern PA EMS Council before the instructor candidate will be issues EMS Instructor Certification.

Revised: 06/12/2023

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