



Emergency Medical Technician Program

You will receive a complete orientation on the first day of class, but in the meanwhile, there are a few prerequisites that need to be prepared for prior to the first day.

í X Please become familiar with the requirements for placement in the National Registry of Emergency Medicine sg39 115.92 Tf 307.8 9Regi3 11.0.icians. You19.97207.002J /ucto7.002. əswə7.

M Y M Y

b. MMR Titer(antibody titer test to check for immunity to Measle
Titer Date ___/___ Titer Result _____

M Y

Health Care Provider

Name _____ Address _____

Si

Please return form to:
NIC Workforce Training Center
525 S. Clearwater Loop, Post Falls, Idaho 83854
Fax (208) 769-3224
Phone (208) 769-3214