

Emergency Medical Services Commission

Dept. of Public Health & Social Services
194 Hernan Cortez Avenue, Suite 213 Terlaje Professional Building Hagatna, Guam 96910

CHECKLIST: Application for Licensure/Reciprocity

Please V one: EMD EMR EMT AEMT ALS EMT-P

NAME: _____ APP DATE: _____
Last Name First Name Middle Name Meeting Date: _____

- ____ Application 'Notarized' (Form EMS 2022/09: 001NR):
 - At least 18 years of age YES NO
 - Be a High-School Graduate YES NO
- ____ Police Clearance 'GPD', original Seal (not more than 2 months from application date)
- ____ Court Clearance 'Superior Court of Guam', original Seal (not more than 2 months from application date)
NOTE: If less than 2 months in Guam, Submit an OFF-ISLAND Police and Court Clearances 'Original Seal' (not more than 2 months from application date)
- ____ Police/Court additional documents (judgment, justification, dismissal, probations, etc) **(If Applicable)**
- ____ Current Color ID photo (Guam Driver's License OR U.S. Passport = one 2x2 passport photo within last 3 months from Application date) (Sign and date 2/black or blue ink, or photo right 'front' vertical)
- ____ 1 Letter of Reference (GFD Original Letterhead) from GFD Training Bureau, etc. (current OR last EMT job Reference Letter), Ref: EMT moral character (not more than 2 years from application date)
- ____ Copy of Original & Valid DPHSS Office of EMS Current 'License card'
- ____ Copy of Original NREMT Certification Card/Certificate
- ____ Current Certificate of 'Course Completion' **(New Applicants)**
- ____ Certification VERIFICATION (Form EMS: 2022/09 001NR)
***For NREMT: Print-out On-Line 'Candidate Status' (www.nremt.org)
- ____ Notarized affidavit of the applicant's 'Change of Name' **(If Applicable)**
- ____ Licensure Application Fee (See: 'PL 36-121' Section 5 84105 (s) 1 A) **(Subject to Change based on AAL)**

| FEE SCHEDULE: | Initial App | 120 Days | 60 Days | 30 Days | W/in 90 DAYS of Expiration |
|----------------------|--------------------|-----------------|----------------|----------------|-----------------------------------|
| EMR/EMT: | \$75.00 | \$50.00 | \$75.00 | \$75.00 | \$100.00 |
| AEMT/EMT-P: | \$125.00 | \$75.00 | \$100.00 | \$125.00 | \$150.00 |

MANDATORY REQUIREMENTS:

EMD/EMR/EMT: ____ 1) Valid Current Driver's License (operator/chauffeur)
____ 2) Valid Current CPR/BLS Card (AHA)

AEMT/ALS/Paramedic: ____ 1) Valid Current Guam Driver's License (chauffer)
____ 2) Valid Current CPR/BLS Card (AHA) as well as Advance Cardiac Life Support Card (AHA) & Pediatric Advance Life Support Card (AHA)