



Jefferson Parish Emergency Management
EMS Compliance Division
910 3rd Street
Gretna, LA 70053
Phone (504) 349 5360



Application for Non-Emergency Medical Transfer Attendant Certificate

DATE: _____

PLEASE CHECK ONE: _____ **NEW APPLICATION \$40.00** _____ **RENEWAL APPLICATION \$40.00**

Name: _____
First Middle Last

Address: _____
Street City State Zip Code

E-Mail Address: _____

Cell Phone #: _____ Date of Birth: _____

Driver's License #: _____ State: _____ Class: _____ Exp Date: _____

C.P.R. Certification completed (month/year) _____ Exp Date _____

First Aid Certification completed (month/year) _____ Exp Date _____

Defensive Driving completed (month/year) _____ Date Taken _____

Name of Employer: _____

A CRIMINAL BACKGROUND CHECK ON EACH APPLICANT MUST BE PROVIDED WITH THIS APPLICATION

Have you ever been convicted of a felony? Yes ___ No ___

If "yes" explain: (Submit appropriate paperwork to this office with your application for review by the Jefferson Parish Attorney)

Do you have any felony charges pending? Yes ___ No ___

if "yes" explain: (Submit appropriate paperwork to this office with your application for review by the Jefferson Parish Attorney)

Are you now or have you ever been addicted to any of the following?

Alcohol: Yes ___ No ___ Narcotics: Yes ___ No ___ Drugs: Yes ___ No ___

If "Yes" explain: (Submit appropriate paperwork to this office with your application for review by the Jefferson Parish Attorney)

Note: It is unlawful to give false or misleading information on this application. Violation of this regulation will be reason for denial of a certification or revocation if discovered after issuance. The undersigned authorizes the Parish of Jefferson to investigate the validity of all statements herein and to report such findings to other applicable Local, State and Federal Agencies: (incomplete or unsigned document will preclude processing and will be returned to applicant).

Full Signature

Date

Pursuant to Jefferson Parish Ordinance 24658 an amendment to Section 5-40 of Chapter 5, Article II, Division 7 of the Jefferson Parish code of Ordinances which establishes and sets forth a fee schedule for licenses, permits and certificates required by this chapter and to provide for related matters. Whereas, the Parish of Jefferson desires to maintain certification, licensure and professional regulations, relative to emergency medical personnel, ambulance services, emergency medical response services and patient transport or transfer services that are consistent with the Regional One Protocol effort and applicable State and National Standards

For Office Use Only

RENEWAL # ORIGINAL #	MONEY ORDER - BUSINESS CK #	FEE PAID: Original \$40.00 Renewal \$40.00	DATE & RECEIVED BY:

WE ONLY ACCEPT BUSINESS CHECKS OR MONEY ORDERS Please make payment out to "Jefferson Parish Pooled Cash"

Non-Emergency Medical Transfer Attendant Application Instructions

**** PLEASE READ CAREFULLY ****

MARK YOUR CALENDAR FOR RENEWAL DATE, AS THE RENEWAL OF THIS CERTIFICATE IS YOUR RESPONSIBILITY ANY EXPIRED CERTIFICATES WILL RESULT IN A FINE OF \$100.00

Only after the information on this application is verified, your Jefferson Parish NEMT Certificate will be issued

NEW APPLICANTS ONLY: Please make an appointment with the EMS Compliance Office and bring with you the following Current Original Documents and a Current National Criminal Background Check to apply:

RENEWAL APPLICANTS ONLY: Submit completed application and copies of the following Current Original Documents and a Current National Criminal Background Check along with your payment to your supervisor, designated Administrative contact, or mail them to the EMS Compliance Office.

This application is for a **Non-Emergency Medical Transfer Attendant** employed on any non-emergency medical transport vehicle (not an ambulance) that operates in Jefferson Parish (unincorporated).

1. **First Aid** card; This may be American Red Cross (Multi-Media First Aid, Standard First Aid, and Advanced First Aid), American Safety & Health Institute (Universal First Aid), National Safety Council (First Aid Essentials), or Department of Transportation (First Responder). **Good for 2 years. Any substitutions must be approved by this office.**
2. **Defensive Driving** certificate from National Safety Council (8 or 6 hour course); such certificates expire **one** year after issue. **Any substitution must be approved by this office. Annual renewal required.**
3. **Driver's License - Chauffeur Class "D"** (Class "E", **unacceptable**, this is a standard Driver's License.)
4. **C.P.R. Certification** by either American Heart Association (Healthcare Provider) or American Red Cross (BLS for the Professional Rescuer) **Good for 2 years. Any substitutions must be approved by this office.**
5. **National Criminal Background Check – Must be a current background check.**

New Application:

Non-Emergent Medical Transfer Attendant \$40.00

Renewal Application:

Non-Emergent Medical Transfer Attendant \$40.00

Expired Applicant:

Non-Emergent Medical Transfer Attendant \$100.00 late fee + \$40.00 renewal fee

Payable by cashier's check, business check or money order

Please make all cashier's checks or money orders payable to **Jefferson Parish - Pooled Cash.**

All fees will be forfeited if all requirements are not met within 30 calendar days of payment.

***** LATE FEE OF \$100.00 *****

***** Assessed if Jefferson Parish NEMT Certificate
is expired past the Expiration Date *****