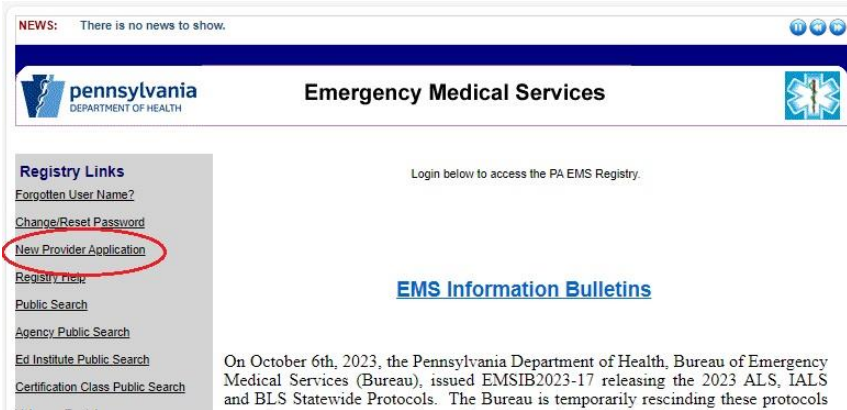


EMS Registry Job Aid for an EMR or EMT Student

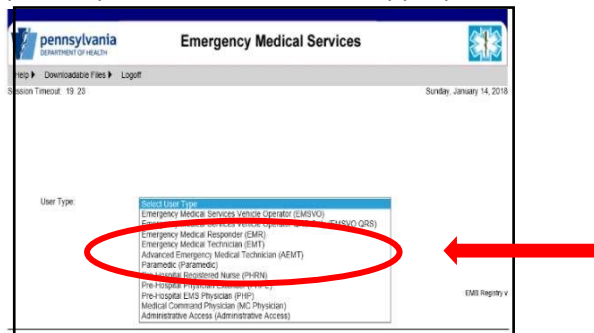
You will need your full Social Security number before beginning this application.

1. Using a computer, access Microsoft Edge and turn the pop-up blocker off. Access the site:
<https://ems.health.state.pa.us/registry/logon.aspx>
(The system will NOT work on mobile devices, Apple products or other browsers).

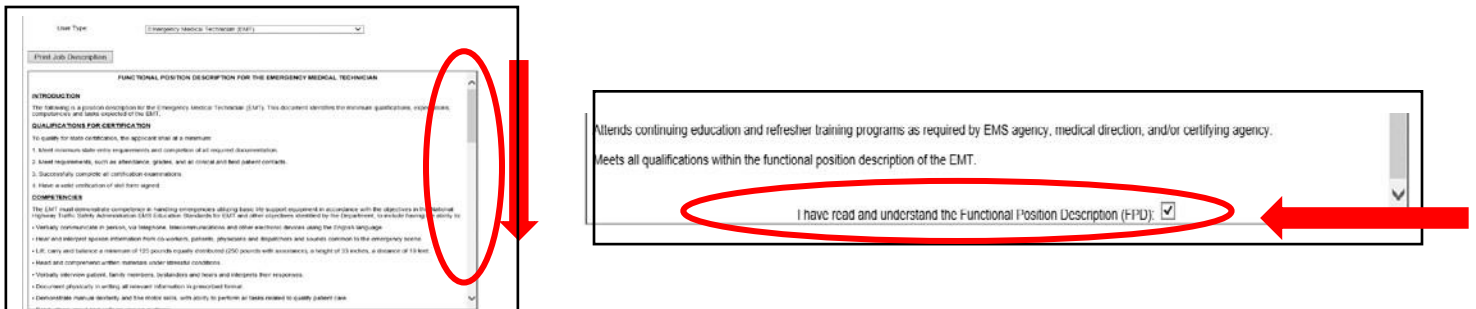
2. On the left-hand side, click on “New Provider Application”.



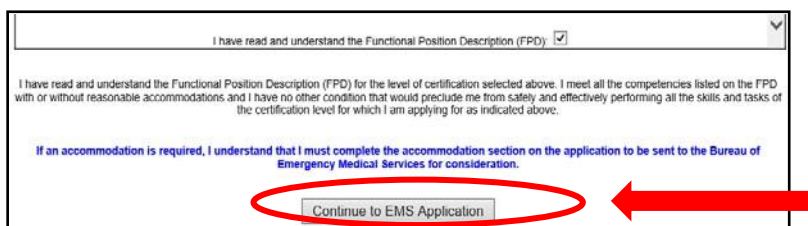
3. Read and answer the EMS/EMSVO question. If you answer ‘yes’, you will be directed to contact your local Regional EMS Council (contact information provided). If you answer ‘no’, continue to Step 5.
4. In the “User Type” drop down box, select the appropriate level of certification you are requesting – either EMR or EMT.



5. Read the Functional Position Description for the level of certification you are requesting. You will need to scroll within that box all the way to the bottom to click on “I have read and understand the Functional Position Description (FPD).”



6. The screen will refresh; read the text and then click on “Continue to EMS Application.”



7. You will be directed to the Applicant Data – General Information Tab. Complete all fields in the General Information Tab.

The EMS ID box you can leave blank.

8. Social Security # - If you have a Social Security number, but choose not to provide it, check the appropriate box and enter either your ID number (PA driver's license or PA Photo ID) or VISA number. Another tab titled, "Disclosures" will populate, and you will be asked to authorize the PA Department of Health to obtain your Social Security number from the PA Department of Transportation. Your application will not be processed for certification until the PA Department of Health receives your Social Security number. This may possibly delay the issuance of your EMS Certification.

9. If you do not have a Social Security number, check the appropriate box. Another tab titled, "SSN Waivers" will populate, and you will be required to complete the waiver statement.

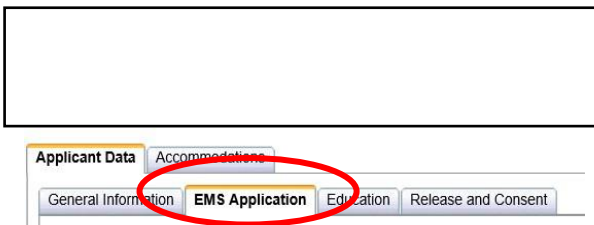
10. The EMS ID box you can leave blank.

11. If you check "Yes" for Criminal History, another tab titled, "Criminal History" will populate, and you will be required to complete additional information. If you have questions relating to convictions, click on the blue help bubble.

12. If you check "Yes" for Disciplinary Action, another tab titled, "Disciplinary Action" will populate, and you will be required to complete additional information.

13. In the Additional Information section, check "No" for the Certification by Endorsement question. Read the question about Accommodations. If you need an accommodation for the EMS Psychomotor Examination only, check "Yes". Another Tab titled; "Accommodations" will populate. You will be required to complete this section and upload supporting documents.

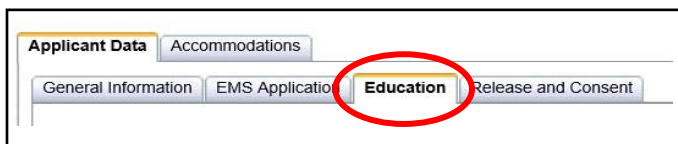
14. Click on the "EMS Application" Tab and complete the information only if it pertains to you; otherwise, you can leave it blank.



15. Click on the “Education” Tab.

- a. **If you completed a non-DOH course**, check the box that says, “Did you attend a class outside of DOH?” Enter your class end date and upload your certificate.

- b. **If you completed a DOH course**, In the Current Certification Class Search section, enter the class number provided to you by your Education Institute and then click on Search.

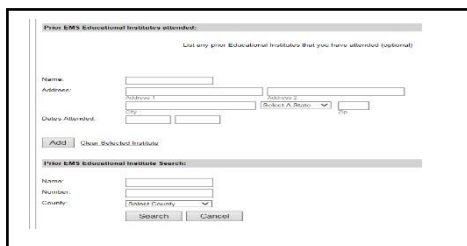


16. Choose the class you wish to seek enrollment and click “Request Enrollment.”

Current Certification Class Search:						
Class Number	Course Name	Class City	Start Date	End Date	Education Institute Name	
1863245	EMT	Ivyland	01/16/2018	01/16/2018	Bucks County Emergency Health Services	Request Enrollment
1						

17. The class information will populate into the Current Certification Class section. Please be sure this is the class you wish to seek enrollment. The listed Educational Institute will be notified of your request to enroll, and you will be responsible for any additional class registration requirements by that Educational Institute.

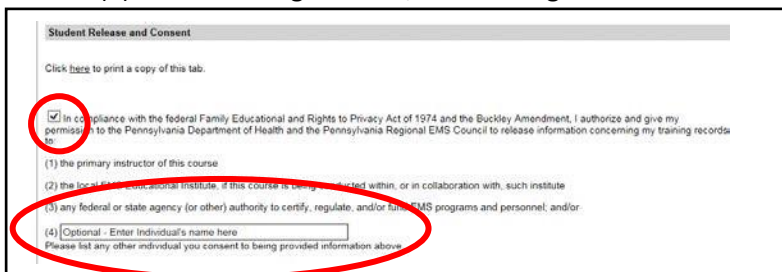
18. Prior EMS Educational Institutes Attended: If you have previously attended an EMS Educational Institute, you have the option to complete this section. This would only be for previous EMR, EMT, AEMT or Paramedic classes you were enrolled in.



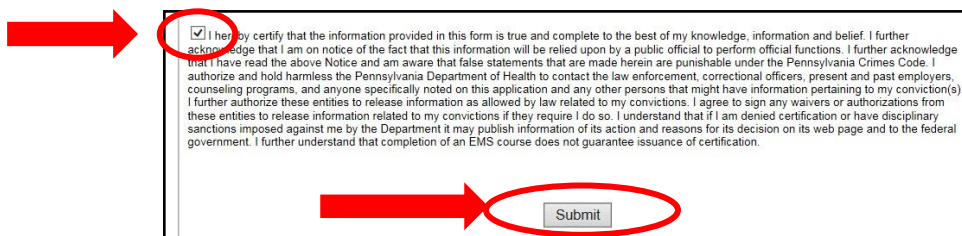
19. Click on the Release and Consent Tab.



20. Read the Training Records statement. If you would like your information released to anyone else, please list their name in the appropriate box (4). Check the agreement/acknowledgement box for this statement.



21. Read the Acknowledgement Statement. Check the agreement/acknowledgement box. If you are OVER 18 years of age, Click Submit.



22. If you have not completed required fields, a box will appear at the top of the application page indicating what fields you need to complete. Complete those fields, click on the Release and Consent tab again and click Submit.

23. A message box will pop-up asking if you are sure you want to submit your application. Click yes. If you receive a pop-up box stating, "There was an error submitting your application." Click Ok and contact your Regional EMS Council. If your application processed, you will receive an email indicating your application has been submitted and is being reviewed.

24. When your application is processed, you will receive an email indicating the status of your application and provide further instructions.