Virginia Office of EMS Basic Life Support Psychomotor Examination Complaint/Grievance Form

Virginia Office of EMS
Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

804-888-9120

I wish to file a complaint based upon the following information in accordance with Virginia Office of EMS policy which was explained to me during the "Candidate's Orientation to the Psychomotor Examination." I fully understand that the decision by the Virginia Office of EMS Certification Test Examiner is final and agree to abide by that final and official decision.
Skill(s) Station in Question:

1) _____
2) _____

Summary of Circumstances:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Print Name: _____ Va. EMS Number:_____

Signature: _____ Date: _____

Note: You are advised to stay on-site during review of your complaint. If you have not yet completed your psychomotor stations, you are encouraged to continue testing. Do not leave this site until the Virginia Office of EMS Test Examiner informs you of their official decision.