

Application to be Designated as an Webcast Receive Site

Following a review the Handbook for Webcasting of Continuing Education Programming, please complete this application with all of the appropriate signatures as indicated below.

Signatures on this page constitute agreement with the requirements as outlined in the Handbook for Webcasting of Continuing Education Programming.

After securing the appropriate signatures, return this form to the Office of EMS. We must have original signatures. You should maintain a copy of this application and the Handbook for Webcasting of Continuing Education Programming for your records. The Office will notify you of the status of your application within 30 business days of receipt.

ACILITY INFORIVI	ATION:					
Facility Name						
Facility Official Name						
Mailing Address	Last Name		First Name		MI	
0 11 111					+	
	Number, Street, Apt.	City		State	Zip +4	
E-mail Address			Facility Phone (for student c			
Signature	Date					

PRIMARY PROCTOR INFORMATION:

Name Last Name First Name Mailing Address Number, Street, Apt. Work Phone # Home Phone # E-mail Address Cell Phone # Signature Date

Virginia Office of Emergency Medical Services

1041 Technology Park Drive Glen Allen, VA 23059 804-888-9120

http://www.vdh.virginia.gov/emergency-medical-services/

EMS.TR.74

Revised: February 2020



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SECONDARY PROCTOR INFORMATION:

Mailing Address	Last Name		ame	MI	
Walling Address				+	
	Number, Street, Apt.	City	State	Zip +4	
Work Phone #		Hoi	me Phone #		
E-mail Address		Cel	Phone #		
Signature			Date		

For more information about Webcast Sites, please contact Chad Blosser or Tracie Jones at the Virginia Office of Emergency Medical Services

Office of Emergency Medical Services
Accreditation, Certification & Education
1041 Technology Park Drive
Glen Allen, VA 23059
800-523-6019 (toll free)
804-888-9100 (Richmond)

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