



State Authorization for National Registry AEMT Testing

Virginia Certified EMT Information

Section 1: Applicant Information (completed by all applicants)

Provider Name:

FIRST MI LAST SUFFIX

Address:

STREET, APT#

CITY STATE ZIP

E-mail Address:

Phone Number:

Virginia Certification Number:

Level:

If the applicant is a current Virginia Certified AEMT provider within two (2) years of this request, then complete Section 2 by signing and dating then mail this form to:

NREMT Authorization Request
Division of Accreditation, Certification & Education
Virginia Office of EMS
1041 Technology Park Drive
Glen Allen, VA 23059

If the applicant holds a valid Virginia Advanced EMT certification card issued within three (3) years and it has been more than two (2) years since your last Virginia AEMT certification then recertify your current ALS certification and complete Sections 1 and 2 prior to mailing this form.

Section 2: Confirmation of Information

I hereby affirm that all statements on this application are true and correct. It is understood that false statements or documents may be sufficient cause for OEMS to deny the applicant's request for authorization to complete NREMT testing.

Signature:

Print Name:

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/>

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Instructions

- A) This form be printed and completed candidates are defined as:
- 1) Currently Virginia certified Advanced EMT providers not beyond two years since certification or recertification of this request.
 - 2) Currently Virginia certified Intermediate providers not beyond two years since certification or recertification of this request.
- B) E-mail the application to Debbie Akers (deborah.t.akers@vdh.virginia.gov). The date of request is based upon the date the e-mail was sent.
- C) If your Virginia ALS certification was issued greater than two (2) years prior to the request date, you are not eligible for National Registry EMT testing authorization until you recertify your Virginia ALS certification.
- D) Authorization for National Registry ALS testing requires the applicant to possess current Virginia EMS certification at the Virginia Advanced EMT level.
- E) **Attach a copy of your current CPR card to the application.**
- F) **After e-mailing the application to the Office of EMS you must:**
1. Visit the National Registry web site at www.nremt.org.
 - a. If you are currently NREMT certified, log into your NREMT account—once logged in skip to step “c” below:
 - b. If you are NOT NREMT certified, on the left hand side of the screen, click “Create New Account”
 - c. Complete the online account creation page.
 - i. In the section “Request User Roles” make sure you select: “Applying to become nationally certified”.
 4. Once your account is created, you will be required to login to the NREMT system.
 5. After logging in, complete the NREMT online application.
 - f. **When prompted select “New Program”. Then select “Virginia Office of EMS—site number 76000.**
- A) The Office of EMS will go on-line weekly to approve registrants after which you will receive an Authorization -to-Test (ATT) letter from the National Registry.
- G) Once the ATT letter is received, you must contact a National Registry approved Pearson Vue Test center to arrange for taking the computer adaptive test.
- H) You will be required to complete the corresponding NREMT practical (psychomotor) examination at any of the approved practical examination sites (see the Virginia Office of EMS National Registry Psychomotor Test schedule at:
- 1) <https://www.vdh.virginia.gov/emergency-medical-services/education-certification/provider-resources/virginia-national-registry-psychomotor-examination-schedule/>
- I) Incomplete applications will not be processed.
- J) You should allow for up to thirty (30) days from the start of this process until receiving an ATT letter from National Registry.



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Section 1 and 2 MUST be completed by all applicants.

Section 1

Provider Name:	Print your First name, Middle initial, Last name and suffix.
Address:	Print your current mailing address.
Virginia Certification Number:	Print your Virginia Office of EMS Certification Number.
Level:	Indicate your current Virginia EMS certification level.

Section 2

Must be signed and dated by the applicant.