**Licensure Course Request Checklist**

This form and the five items listed below should be included with course request submission. Course request items must be submitted 60 days before proposed course start date, per IDPH Administrative Code. Clinical contracts should be in place before proposed course start date ([LINK](https://memorial.health/Resources/214eb780-d77f-46a6-a1c3-abb72f05bdbb/Contract%20Request%20Form.pdf)). Course can be advertised after the approved request is returned to the primary instructor. Courses longer than EMT will have additional timeline items.

󠆽 IDPH Training Request ([LINK](https://memorial.health/Resources/d88fbb02-d566-491d-90fb-d5bec99488fe/EMS%20Training%20Application.pdf))

󠆽 Course Syllabus - Including milestones below (EMR, PHRN and ECRN may not have all requirements.)

󠆽 Course Policies Handbook or Guide

󠆽 IDPH Lead Instructor license

󠆽 IDPH EMT license or other qualifying credential

|  |  |
| --- | --- |
| Date | Milestone- all applicable should be included on student syllabus |
|  | Course request submitted  󠆽 󠆽 Course is open to the public󠆽 󠆽 󠆽 □ Course is limited to only personnel of the host agency 󠆽 󠆽 󠆽 |
|  | 2nd Day of Class (EMS System to attend virtually.) Time X |
|  | Class roster submitted to EMS Office. |
|  | Clinical requirements complete. Instructor to validate; submit student list to clinical locations. |
|  | Partial clinical completion due |
|  | 1st Student update to EMS System |
|  | Limmer EMT review |
|  | NREMT accommodations requests due. Unlock previous NREMT accounts (45 days before final). |
|  | Final student update to EMS System |
|  | Full clinical completion due |
|  | Final course exam and NREMT registration (EMS Office to attend in person.) Time X |
|  | Final course exam retest (24-72 hours after first attempt) Time X |
|  | 3-month P/F data to instructors |

Clinical sites verified for availability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Electronic document platform utilized: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Testing platform utilized: \_\_\_\_\_\_\_\_\_\_\_\_

Acknowledgements

***Instructors are reminded that the Scope of Practice for the level of licensure should be taught, in its entirety.*** Licensure course data will be collected by Memorial EMS in collaboration with other Central Illinois EMS Systems. Like courses will be grouped together as a measure of course success to help identify ways in which training courses can be more successful. Data points will include student enrollment, course completion, NREMT certification and IDPH licensure success rates and timelines. Data will be organized by site code and instructor and recorded at three months post course completion. Data will be made available to agencies and instructors quarterly.

As the IDPH Lead Instructor and EMS agency holding the course, we acknowledge that we are responsible for teaching the scope of practice for this level of training in its entirety. Any student who does not meet the minimum standard will not be forwarded for certification or licensure.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course Lead Instructor Signature Printed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency Leader Signature Printed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_