



Lee Ambulance Service
EMT Basic Class Application

Personal Information

Name:		
Address:		
City:	State:	Zip:
Home Phone:		
Work or Cell Phone:		
Email address:		
Are you affiliated with an ambulance service or fire department? Yes No If yes, list here:		
Have you ever been convicted of a felony? Yes No (If yes, you may not be eligible to sit for the Massachusetts certification exam.)		
<p>The applicant, in order to be eligible for the state certification examination must:</p> <p>Be able to read, understand and communicate in English.</p> <p>Meet all requirements set forth by the Massachusetts Office of Emergency Medical Services.</p> <p>Be at least 18 years of age.</p> <p>Be free from addiction to alcohol or any drug.</p> <p>Be able to lift and carry 125 pounds.</p> <p>Be free from any physical or mental defect or disease which might impair his/her ability to provide emergency care within the scope of the EMT's training and responsibilities, or which may jeopardize the health of another.</p>		

I have completed this application truthfully and without falsification.

Signature

Date

Tuition \$700.00 (not including MA exam fees)

Please return this form with deposit of \$100.00 (non-refundable)