

MSFA EMS FIELD CLASS REQUEST FORM (Rev 2/2023)

Requesting Department:	
Address and City:	
Phone Number:	Fax Number:
Email:	Contact Person:

Please Review the description of the courses in the catalog before requesting.

Please indicate which course you are requesting

NCCP Annual EMT Refreshers

- EMR (CC EMT-18)
- EMT-Basic(CC EMT-27)
- EMT-Advanced(CC EMT-36)
- EMT-Paramedic (CCEMT-36)

American Heart Association Courses

- BLS Provider
- BLS Instructor
- ACLS Provider
- ACLS Instructor
- PALS Provider
- PALS Instructor

**Emergency Medical Services
Classes**

- Emergency Medical Responder (**CC-EMR-H**)
- Emergency Medical Technician-Basic (**CCEMT**)
- Emergency Medical Technician-Advanced (**CCEMT A**)
- (TCCC) Tactical Combat Casualty Care (**CC 191-TC**)
- (TECC) Tactical Emergency Casualty Care (**CC 191-EC**)
- (TECC-LEO) TECC for Law Enforcement Officers. (**191-LEO**)

Type of Field Delivery Requested: (please indicate)

- Department to provide instruction and Academy staff will administer testing.
- Academy staff to designate contract workers (Associate Instructors) to deliver the course and final skills/testing.

Documentation Required to Continue this field delivery request:

- Signed MS Fire Academy Field Delivery Request form emailed to msfamed@msfa.ms.gov
- Completed MSFA Roll Sheet emailed to msfamed@msfa.ms.gov**
(Please print or type student names and departments)
- Proposed Delivery Start Date/Dates: _____
- Students from Other Departments will Participate (Department Names): List Below Other Agencies

MSFA EMS FIELD CLASS REQUEST FORM

Please list the names of students below	
Proposed Student Roster	

Please list any other participating agencies below:

Participating Department:	
Address and City:	
Phone Number:	Fax Number:
Email:	Contact Person:

Chief Signature:	Training Officer Signature:
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Upon receipt of this document and the roll sheet, the Academy staff course coordinator will contact you regarding your request. If a Memorandum of Understanding is required, the Memorandum of Understanding (MOU) document will be submitted for the signature of the chief. Upon receipt of a signed MOU, the field delivery course material with instructions will be submitted to you. Testing dates will be agreed upon by both parties according to availability. **ALL CONTRACTS MUST BE SIGNED WITHIN 10 DAYS BEFORE BEGINNING THE OF CLASS. ANY CHANGES IN THE CONTRACT WILL RESULT IN A DELAY OF THE PROGRAM BEGINNING.**