

Application Form for EMT and Paramedic Work Pass Renewal

PERSONAL PARTICULARS		
Full name as in Work Pass:		Position of Renewal: (Please circle) EMT/PARAMEDIC
FIN/Work Pass:	Nationality:	Date of Birth (DD/MM/YYYY):
Gender: (Please Circle) Male / Female	Current Company Name:	
Current Company Address:		
Current Company Email Address:		Current Contact Number:

EMPLOYMENT HISTORY			
Date (MM/YYYY)		Company Name	Job Title
From	To		

CERTIFICATION TYPE	
Please Tick:	Date of Completion
<input type="checkbox"/> EMT Recertification Programme (For EMT)	
<input type="checkbox"/> Joint ITE-UPEC Certificate in Pre-Hospital Emergency Care course (For Paramedic)	
BCLS and AED	



DECLARATION

(1) I hereby give my consent to the Unit for Pre-hospital Emergency Care (UPEC) to:

a) Obtain and verify all the information provided as part of the application process if necessary. I understand that this includes, but is not limited to, such activities as contacting my previous employers as may be deemed appropriate for the purposes of assessing my application. I hereby release from all liability or responsibility all persons, companies, corporations, when furnishing such information.

b) Use the data I have provided for the administration and upkeep of my record as a qualified EMT or paramedic, including to send me updates about upkeep of credentials where necessary.

(2) I declare that all the information given by me in this application and any additional documents attached hereto are true, complete, and accurate. I understand that any falsified documentation or evidence at the time, or subsequently found, will be treated as basis for disqualification of my application.

By signing below, I hereby certify that I have read and understood all the clauses above and that I agree to all of them.

Name and Signature of Applicant

Date

**Name and Signature of Applicant's
Current Employer**

Date



ANNEX A

CHECKLIST ON SUPPORTING DOCUMENTS TO BE SUBMITTED

Please ensure that you have attached the following documents to your submission.
Incomplete submission will subject your application to rejection.

- ☐ 1) Application Form
- ☐ 2) Copy of Work Pass (front and back)

Certificate of completion for:

- ☐ 4) Joint ITE UPEC Certificate in Pre-hospital Emergency Care course (for Paramedic)
- ☐ 5) EMT Recertification Programme (for EMT)
- ☐ 6) Valid BCLS and AED