CONTINUING EDUCATION REPORTING FORM

Emergency Medical Dispatch

Name: _____

Continuing Education:

You must accumulate a *minimum* of 12 recertification points (1 point per hour) per year through continuing education, for a total of 24 points (24 hours) over the two year recertification period. One point is equal to one hour of classroom time. Continuing education can include taking APCO Institute courses, college courses, in-service training, conference seminars, etc.

Date	Training Course Title/Description	Total Hours
	Total Hours:	

I attest that all the information provided on this document is true. I understand that falsifying any information will result in my Emergency Medical Dispatch (EMD) certification being revoked immediately and any payment received will not be refunded.

EMD Name _____

EMD Signature _____

Today's Date _____ (Make additional copies as needed)