CEH CREDIT FOR LICENSURE COURSES

This form must be completed for EACH course to be considered for credit.
Students may be required to fill out a FERPA release from their Educational Institute. The State of Maine Emergency Medical Services Bureau does not need financial or code of conduct information. Please seek guidance from your program director.

To be completed by student

Student Information
Name
Maine EMS License #
Email
Phone
Program of Study
EMT
AEMT
Paramedic
Other

To be completed by Training Center

Training Center Contact Information
Training Center Name
Primary Contact
Email
Phone

Course Instructor Information
Name
Maine I/C Number or Degree Level
Email
Phone

Course Information
Course Name
Dates attended
Current/Final Grade

Indicate Hours Completed (in hour or half-hour increments)

<table>
<thead>
<tr>
<th>Topic Area</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prep/Ops</td>
<td></td>
</tr>
<tr>
<td>ABC</td>
<td></td>
</tr>
<tr>
<td>Assessment</td>
<td></td>
</tr>
<tr>
<td>Medical</td>
<td></td>
</tr>
<tr>
<td>Trauma</td>
<td></td>
</tr>
<tr>
<td>OB/Peds</td>
<td></td>
</tr>
<tr>
<td>BLS Skills</td>
<td></td>
</tr>
<tr>
<td>ALS Skills</td>
<td></td>
</tr>
</tbody>
</table>

Verification by Course Instructor or Training Center Official
Name
Signature
Date

Do not include hours related to education resulting in a card/certificate, such as CPR, ACLS, PHTLS, etc

If course is not part of an EMS licensure/certification program, please attach a course outline/syllabus

---

● Excellence ● Support ● Collaboration ● Integrity ●

PHONE: (207) 626-3860
TTY: (207) 287-3659
FAX: (207) 287-6251

With offices located at the Central Maine Commerce Center, 45 Commerce Drive, Suite 1, Augusta, ME 04330