

Cowlitz County EMS Course Application: IV Tech

Name (Last, First): _____

Email: _____

Phone Number: _____

Mailing Address: _____

Year of initial EMT certification: _____

.....

Affiliated Agency: _____

Agency supervisor support: Signature below confirms _____
(student name) is affiliated with the agency listed above. This student has the support of this agency to enroll and proceed through the IV Tech course. There are state certified BLS evaluators or an SEI with IV experience available to help student achieve success through this course by offering supervision over IV sticks at our agency.

Agency Signature: _____

.....

Course Tuition: \$850.00 (\$150.00 credit for agencies providing necessary equipment for IV labs).

Equipment list 25 of each: IV catheters (mix of 18g/20g), locks, flushes, tourniquets, alcohol and betadine wipes, tegaderm, gauze pads.

1 of each: box of gloves in student size, tape, small sharp container.

_____ Agency will pay in full amount (\$850)

_____ Agency will pay **and** provide equipment (\$700)

_____ Self-pay (\$850)

Agency signature for payment: _____

Printed name of signature: _____

I, _____ have full intention of enrolling and taking the Cowlitz County EMS Course for IV Tech. I am aware of the classroom days and have ensured I can be in attendance to classroom days. I have full support of my agency and understand I will have to take initiative and seek out evaluation from that of a state certified EMS evaluator or SEI with IV experience for outside lab days.

Student Signature: _____

.....

Please return completed application to Stacie Poff by email: spoff@cowlitz6fire.org

Please email or text with any questions: 360-957-7597