



Avenue Rescue Services

P.O. Box 45280 Nairobi 00100

Emergency Medical Technician (EMT-1) Training Course July 2016 Application Form

Please note that applicants to the EMT-1 Training Course must be at least 18 years of age, high school graduates and holders of a First Aid certificate from a certified Institution

Title _____ Last Name _____ Other Names _____

Address: PO Box _____ City _____ Postal Code _____

Phone Number: Mobile _____ Home: _____

Other Emergency Contact: _____ Date of Birth ____/____/____

Email address _____

High School Attended _____

Dates attended: From (Year) _____ To: _____

Other College Attended _____

Dates attended: From (Year) _____ To: _____

Agency affiliation if any _____

I confirm that the information in my application is complete, accurate and honestly presented.

Signature _____ Date _____

Please send this completed form and attach the following documents **before June 5th 2016**

- A copy of your KCSE and other college Certificates
- A copy of your National Identification Card
- A copy of your Valid Driver's License (Class B,C,E)
- A copy of your current First Aid certificate from a recognized institution

This form should be delivered to the *Avenue Rescue Services* offices on Ojijo Rd next to the Kobil Petrol Station, or e-mail scanned copies to rescue@avenuehealthcare.com