



EMT Reciprocity Application Instructions

PLEASE NOTE: If you have been trained by an emergency medical services (EMS) system in Illinois and have taken the National Registry exam, you do not need to apply for reciprocity. The EMS system coordinator for the system where you were trained needs to submit the necessary documentation to the attention of the Licensure Section at the address below. Reciprocity is only for those who have not received training in Illinois.

In order to obtain Illinois reciprocity:

1. Complete Part I of the EMT Reciprocity Application.
2. Attach photocopies of your EMT certificate or license and current American Heart Association Healthcare Provider Cardiopulmonary Resuscitation (CPR) card or equivalent.
3. Provide a letter from the EMS medical director indicating that you are in good standing and up-to-date with continuing education hours if you currently participate in an EMS system under an EMS medical director. If you cannot obtain a letter of recommendation, you will need to request a waiver as described in item 4.
4. If you have not functioned as an EMT or under the direction of an EMS medical director, include a letter with your signature stating that you have never worked as an EMT or under an EMS medical director and request that the letter of recommendation be waived. Also, if you are requesting a waiver, you will need to provide photocopies of all continuing education you have completed during your current license/certification period.
5. Complete Part III and Part IV of the application. This information is required. Application will not be processed if incomplete and/or requested documents are not provided. Other applicable forms are available at www.idph.state.il.us.

Send the application, \$50 fee (paid with cashier's check or money order payable to IDPH, personal checks will not be accepted), and all requested documents in an envelope to:

Illinois Department of Public Health
Division of Emergency Medical Systems and Highway Safety
Attention: Reciprocity
422 South Fifth Street, Third Floor
Springfield, Illinois 62701

An Illinois EMT license will be mailed to you after verification that you have met all the requirements for licensure. If you have any questions, please call 217-785-2080, or send an e-mail to: DPH.EMTLIC@illinois.gov.

Once you have been issued an Illinois EMT license you must adhere to *Section 515.590 EMT License Renewal*, of the *Illinois Emergency Medical Services and Trauma Center Code (77 Ill. Adm. Code 515.590)*.



Emergency Medical Technician (EMT) Reciprocity Application

Part I: This section is to be completed by the applicant.

Use your legal name

First Name Middle Name Last Name

Address City State ZIP Code

Phone E-mail Date of Birth Social Security Number

Driver's License Number EMT License Number Issuing State/Agency

Level of EMS license requested for reciprocity

- EMT-Basic EMT-Intermediate EMT-Paramedic

Part II: To be completed by the Emergency Medical Services Licensing Agency

The above named emergency medical technician has applied for an Illinois license through reciprocity based upon licensure from your state. Please verify or correct the above information and provide answers for the following questions.

- Has the above named applicant been revoked or suspended in your state?
 Yes (provide an explanation on a separate sheet of paper and attach) No
- Has the course of instruction met or exceeded Department of Transportation National Standard Curriculum guidelines?
 Yes No (provide an explanation on a separate sheet of paper and attach)
- Is there any known reason why licensure in Illinois should be denied?
 Yes (provide an explanation on a separate sheet of paper and attach) No
- The above named applicant currently possesses an EMS license/certificate issued from our office as:
 EMT-Basic EMT-Intermediate EMT-Paramedic

Number of continuing medical education hours required for renewal in your state _____

EMT License Number _____ Issue Date _____ Expiration Date _____

Person Completing Part II

Name _____ Signature _____

Title _____ Phone _____ Date _____





Part III: Child Support Declaration

Under Illinois law, you must select one of the following choices regarding child support and sign the declaration. The Department will **be unable to process your application until a completed statement is provided**. This information is required of **ALL** applicants, regardless of whether the applicant has ever been ordered to pay child support. If issues of court-ordered child support do not apply to you, check the third statement: "I do not have to pay child support." **Making a false statement shall subject the applicant to contempt of court [5 ILCS 100/10-65(c)].**

I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT:

- I AM UP-TO-DATE WITH CHILD SUPPORT PAYMENTS
- I AM MORE THAN 30 DAYS DELINQUENT IN COMPLYING WITH COURT-ORDERED CHILD SUPPORT
- I DO NOT HAVE TO PAY CHILD SUPPORT

Part IV: Personal History Information

Under Illinois law, you must select one of the following choices regarding felony charges and sign the declaration. The Department will be unable to process your application until this information is provided.

Have you ever been convicted of a felony? Yes No

If yes, provide an explanation of the nature of the offense. An additional fee and authorization for release of information must be submitted to the Department to obtain a criminal history report.

Have you ever had disciplinary action brought against your or a license you have held? Yes No

If yes, provide an explanation of the circumstances for the action.

Under penalties of perjury, I declare that I have examined the application and all supporting documents submitted by me in connection herewith, and to the best of my knowledge, they are true, correct and complete. Failure to so certify shall result in the denial of the request for reciprocity.

Signature

Date



Relicensure Process for Illinois Reciprocity Recipients

IMPORTANT INFORMATION

Please note that your initial Illinois EMS license may not be valid for a full four years. The expiration/lapse date should coincide with your National Registry certification or other state license submitted to obtain Illinois reciprocity. When your Illinois license is due to expire, you will need to renew your license and not reapply for reciprocity.

Illinois requires 120 hours of approved continuing education in a four-year period. When you renew your license for the first time after reciprocity, the number of hours needed for renewal is prorated to the amount of time you held your initial Illinois license. The number of continuing education hours calculates out to 2.5 hours per month of licensure. Below is a sample chart:

Months of Licensure	Hours of Continuing Education	Months of Licensure	Hours of Continuing Education
3	7.5	27	67.5
6	15	30	75
9	22.5	33	82.5
12	30	36	90
15	37.5	39	97.5
18	45	42	105
21	52.5	45	112.5
24	60	48	120

Renewal of your Illinois EMT license is processed through your Illinois EMS system resource hospital if you function with an EMS provider. If you are not practicing in Illinois at the time of your renewal, then you will need to apply for an independent renewal through the Illinois Department of Public Health.