

**Emergency Medical Services (EMS) Board of Prince Edward Island**

c/o Emergency Health and Planning Services – Health PEI

16 Garfield Street, PO Box 2000

Charlottetown, PE C1A 7N8

Phone: (902) 368-6705 Fax: (902) 368-3072

**COPR/OCRP ENTRY-TO-PRACTICE EXAMINATION REGISTRATION FORM**

PART A: Personal Information						
Surname Name:		Given Name(s):				
Phone #:		Email Address:				
Mailing Address:						
City / Town:		Postal Code:				
Date of Birth:		Graduation Date:				
PART B: Education						
Name of Educational Institution:			Province:			
Level of Paramedic Education:	Primary Care:		Date of Completion (DD/MM/YYYY):			
	Advanced Care:					
PART C: Exam Information						
Preferred Exam Location:	Charlottetown, PE:		Preferred Exam Date:	Exam Sitings		Registration Deadline
	Other:			March 1, 2017:		Jan 11, 2017
<u>Attach the following documentation:</u> 1) <b>Proof of program completion</b> Diploma copy or official letter from registrar. 2) <b>Current photo (50mm X 70mm in size)</b> Image must be clear, sharp and in focus, taken against a plain, white, or light-colored background. Photos must be originals, not taken from an existing photo, and must be current within the last 12 months).				May 24, 2017:		April 5, 2017
				Aug 23, 2017:		July 5, 2017
				Nov 22, 2017:		October 4, 2017
				Feb 28, 2018		January 10, 2018
				May 23, 2018		April 4, 2018
				Aug 15, 2018		June 27, 2018
				Nov 14, 2018		Sept 26, 2018
				Next Available:		
Please submit completed registration form and all documentation to Emergency Health and Planning Services email: (emergency@gov.pe.ca). <b>Incomplete applications will not be processed and returned to the applicant.</b> Please refer to the Canadian Organization of Paramedic Regulators' website for the COPR Examination Handbook and Study Guide: (www.copr.ca)						

Personal information on this form is collected by the EMS Board under the authority of the Prince Edward Island's Emergency Medical Technicians Act and Emergency Medical Technicians Regulations. This information will be used to determine eligibility for an EMT license and to maintain a register of licensed EMTs in the province. The collection, use, or disclosure of this information must be in accordance with the Freedom of Information and Protection of Privacy Act, R.S.P.E.I. 1998, c.F-15.01. If you have any questions about this collection of personal information, contact the Director of Emergency Health and Planning Services, Health PEI, PO Box 2000, Charlottetown, PE, C1A 7N8. Phone: (902) 368-6719

<b>OFFICE USE ONLY</b>	Registry Identification Number:	
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