



Michigan Department of Health and Human Services
 Bureau of EMS, Trauma and Preparedness
 Division of EMS and Trauma
 P.O. Box 30207
 Lansing, MI 48909-0207
 517-335-8150 (Phone)

Instructions for Completing Adobe Fillable Applications

If you do not have Adobe Reader on your computer, you may download this free software here:

<https://get.adobe.com/reader/>

Application and Re-approval Application for Initial Education Program Sponsor

Type information in these type of boxes

MDHHS-BETP Use Only	
Date received:	Date amendments received:
Date reviewed:	Date of site visit:
RC Recommended approval:	Regional Coordinator Signature:
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Click on the pink arrow to sign electronically

This application is to be completed jointly by the Program Sponsor Representative and the Program Director. Approval of an education program for EMS is predicated upon completion and submission of this application as prescribed by PA 368 of 1978, as amended. Application rules and compliance with program requirements must be met for the level of initial education program applied for. No courses may be held until the sponsor is approved by MDHHS-BETP.

Once approved, the program sponsor will receive a certificate of approval with the program approval number. The approval will be for a period of three (3) years. For re-approval, the application must be received by the MDHHS-BETP office 60 days prior to the expiration of program. Approval of program is dependent on the program sponsor meeting all requirements and a site visit inspection.

If you are applying for, or are currently approved as a CE program sponsor, check this box:

Eligibility for approval is based on the following:

Check the appropriate box: (proof of sponsor type must be attached to application at submission)

Click on the appropriate box to create a check mark

- | | |
|--|--|
| <input type="checkbox"/> Post-secondary School | <input type="checkbox"/> High School/Vocational/Technical School |
| <input type="checkbox"/> Proprietary School | <input type="checkbox"/> Adult Education Center |
| <input type="checkbox"/> Life Support Agency | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> U.S. Military | |

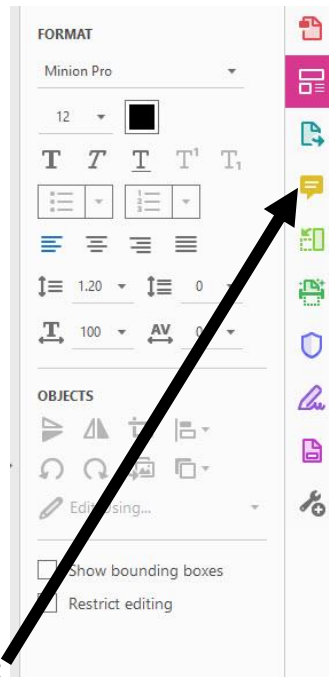
If applying for the Paramedic level, the program sponsor must be a post-secondary school, high school, vocational school, technical school, proprietary school, adult education center, or hospital.

*This page is for demonstration only. Please do not fill out the top portion of the application marked MDHHS-BETP Use Only.

When you see this comment box:

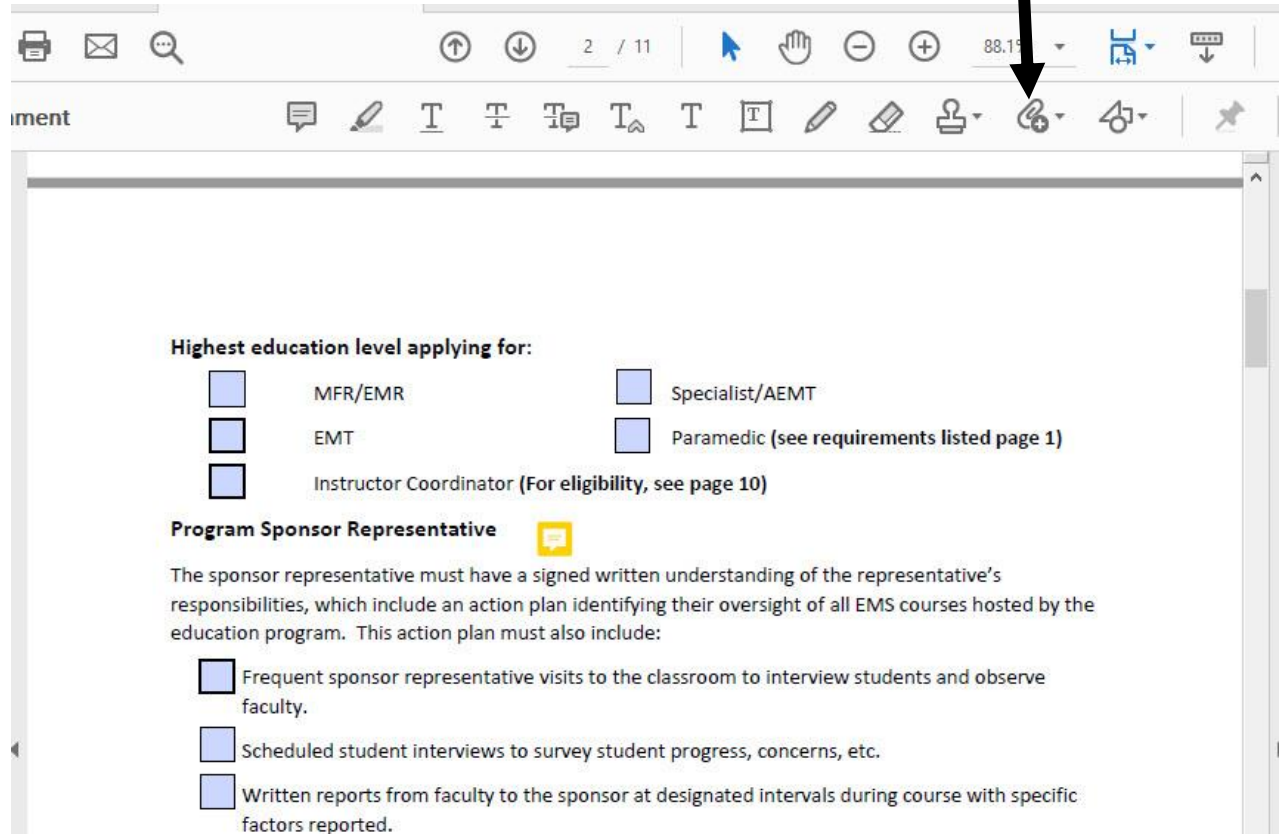


, click on it, and follow the instructions. Look to



your right, and you will see another comment box:

Then go to the top of the document and click on the paperclip icon:



When you click on the paperclip, also click on attach file, find the document and click attach. Attach the file next to the comment box.

Once the application is complete, submit to MDHHS-EMSED@michigan.gov. If the document is larger than 25 mb, you will have to compress using a zip drive. Our email system cannot accept a document larger than 25 mb.

Feel free to contact your Regional Coordinator, or the EMS Education Coordinator for direction if needed. The link to our contact information is here:

https://www.michigan.gov/mdhhs/0,5885,7-339-73970_5093_28508_76846---,00.html

How to Zip Files

Select all files that you want to zip together by holding the CTRL key and click on each document.

Right click and select Send To

Select Compressed or Zipped Folder

This will create a new zipped folder that will show as a new icon. Click the Browse function on the application to find the icon and select for upload.

If you do not see Zip File as an option, you may not have this software installed.