

# IMAGE TREND - EMT RENEWAL INSTRUCTIONS

**BEFORE** you begin:

**DOWNLOAD** all of your documents from Target Solutions. Follow the directions below to download the following:

- Drivers License
- BLS/CPR card
- CE Summary Form (contains summary of training hour completions - should total 24hrs or more)
- CE certificate for: EpiPen, Glucometer and Narcan Training (1 Certificate to include all courses - named later)

**UPLOAD** your completed EMT Skills Form by either using a scanner or a free scanning app on your phone like "Turbo Scan". Photographs are not sufficient unless converted to a pdf file first.

Download your **CE Summary** from Target Solutions

Go to the HOME page and select "**My Credentials**"

Central San Mateo County Training Division

Home Administration Calendar Help

**My Credentials**

**Schedule**

NAME	DUE DATE
COMPANY DRILL - BLOCK 3-21 - Art and Fog of Leadership Assignment	Jun 30, 2021
SPECIAL OPS - BLOCK 3-21 - P-240 Hazmat Incidents Assignment	Jun 30, 2021
NFPA 1500 Bloodborne Pathogens Safety Assignment	Jun 30, 2021
EMS - ACLS Instructor EMS Certifications	Sep 30, 2021
EMS - ACLS EMS Certifications	Nov 30, 2021
Paramedic EMS Certifications	Dec 31, 2021
EMS - PHTLS EMS Certifications	Jul 31, 2022
EMS - PALS EMS Certifications	Sep 30, 2022
EMS - PALS Instructor EMS Certifications	Sep 30, 2022
EMS - CPR EMS Certifications	Dec 31, 2022

**Bulletin Board**

**UPCOMING EVENTS**

EMS TF - IFUS @ Station 28  
May 14, 17

OPS TF - RT-130  
May 24-28 & June 2, 3, 4, 11

For more details about training events, access the [Web Calendar](#)  
Check Out Our [WebSite @ www.csmctd.org](#)

Restock Line: (650)231-4877  
Office Line: (650)558-7611  
Email: [trainingdivision@csmctd.org](mailto:trainingdivision@csmctd.org)

Battalion Chief Jeff Thorne (650) 558-7625  
Battalion Chief Tom Donnelly (650)558-7624  
Clinical Education Specialist Annie Flick (650) 558-7626  
Admin Wendy McGraw (650) 558-7611

If you have questions or comments regarding Target Solutions, please email the [Training Division](#) or click on the Suggestions link above.

NEXT: Select your EMT credential

(ex: For me, I'd select Paramedic)

Central San Mateo County Training Division

Home Administration Calendar Help

**MY CREDENTIALS**

[Add Credential](#)

NAME	NUMBER	START DATE	EXPIRATION DATE
CDL Class C California Drivers Lic.	B7198296		Mar 14, 2025
EMS - CPR Instructor EMS Certifications		Feb 1, 2020	Feb 28, 2023
EMS - PHTLS EMS Certifications		Jul 29, 2018	Jul 31, 2022
EMS - ACLS Instructor EMS Certifications	09180718223	Sep 6, 2019	Sep 30, 2021
EMS - PALS EMS Certifications		Sep 30, 2020	Sep 30, 2022
EMS - PALS Instructor EMS Certifications		Sep 25, 2020	Sep 30, 2022
EMS - ACLS EMS Certifications		Nov 1, 2019	Nov 30, 2021
Paramedic EMS Certifications	P18279	Jan 1, 2019	Dec 31, 2021
EMS - CPR EMS Certifications		Dec 1, 2020	Dec 31, 2022

Central San Mateo County Training Division

Home Administration Calendar Help

**PARAMEDIC**

My Credentials > View Credential: Paramedic

EMS Certifications - Paramedic **97%**

TS credential

STATUS	NUMBER	TOTAL HOURS	START DATE	EXPIRATION DATE
Active	P18279	49	Jan 1, 2019	Dec 31, 2021

Home My Assignments Self-Assign My History My Credentials My Events

General Requirements 48 of 48 **100%**

Training Division Paramedic Sign Off 0 of 1 **0%**

Type "EMS" in the search bar to bring up all applicable EMS CE

\*\*Use of non-EMS CE will cause the County to reject your application!

Click on the printer icon to bring up your CE summary. Ensure you have 24 hours listed.

**Annie Flick**  
Paramedic  
Description: TS credential  
Category: EMS Certifications  
Number: P18279  
Start Date: Jan 1, 2019  
End Date: Dec 31, 2021

Topic	Required	Applied	Needed	Completed
General Requirements	48 Hours	48	0	91
Training Division Paramedic Sign Off	1 Hours	0	1	0
<b>Total</b>	<b>49</b>	<b>48 (97%)</b>	<b>1</b>	<b>91</b>

Date	Title	Topic	Provider Name	Provider Number	Credited	Attachments
Jan 8, 2019	EMS Pelvic Fractures Advanced	General Requirements	TargetSolutions	37-0117-20-TGSF-F3-1295	1 hour(s)	
Jan 8, 2019	EMS Spinal Cord Injuries	General Requirements	TargetSolutions	37-0117-20-TGSF-F3-1299	2 hour(s)	
Jan 23, 2019	EMS - BLOCK 1-19 - LIAID AND LifeVest (EMT & Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Mar 6, 2019	EMS - BLOCK 2-19 - SMOCD Protocol Update (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Mar 6, 2019	EMS - BLOCK 2-19 - Hypothermia Nugget (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Mar 28, 2019	EMS Traumatic Injury During Pregnancy	General Requirements	TargetSolutions	37-0117-20-TGSF-F3-1305	1 hour(s)	
Apr 10, 2019	EMS Traumatic Head and Brain Injuries Advanced	General Requirements	TargetSolutions	37-0117-19-TGSF-F3-1320	2 hour(s)	
Apr 10, 2019	EMS - BLOCK 2-19 - IFUS	General Requirements	Central San Mateo Fire Departments	41-0007	3 hours	
Apr 28, 2019	EMS - BLOCK 3-19 - Hypothermia/Heat Illness (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
May 21, 2019	EMS Pediatric Trauma Advanced	General Requirements	TargetSolutions	37-0117-19-TGSF-F3-1355	2 hour(s)	
May 21, 2019	EMS Pediatric Burns Advanced	General Requirements	TargetSolutions	37-0117-20-TGSF-F3-1294	1 hour(s)	
May 24, 2019	EMS - New Hire EMS Orientation	General Requirements	Central San Mateo Fire Departments	41-0007	6 hours	
May 30, 2019	EMS - BLOCK 4-19 - Bites / Stings / Poison Oak (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Jun 28, 2019	EMS - BLOCK 4-19 - Documentation (Medic and EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	3 hours	
Jul 12, 2019	EMS - BLOCK 5-19 - Crush Injuries (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Aug 2, 2019	EMS - BLOCK 5-19 - Trauma Skills (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	2 hours	
Aug 21, 2019	EMS - Block 6-19 - Protocol Updates, Part 4/4 (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Aug 21, 2019	EMS - Block 6-19 - Protocol Updates, Part 2/4 (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Aug 21, 2019	EMS - Block 6-19 - Protocol Updates, Part 1/4 (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Aug 21, 2019	EMS - Block 6-19 - Protocol Updates, Part 3/4 (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Nov 14, 2019	EMS - BLOCK 6-19 - ACLS Renewal (Medic and EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	8 hours	
Jan 6, 2020	EMS - Block 1-20 PHTLS Online	General Requirements	Central San Mateo Fire Departments	41-0007	8 hours	
Jan 6, 2020	EMS - Block 1-20 PHTLS Online	General Requirements	Central San Mateo Fire Departments	41-0007	8 hours	
Feb 9, 2020	EMS Infectious Disease Control	General Requirements	TargetSolutions	37-0117-19-TGSF-F3-1324	1 hour(s)	
Feb 20, 2020	EMS Protecting Yourself from Influenza	General Requirements	TargetSolutions	37-0117-18-TGSF-F3-0641	1 hour(s)	
Feb 27, 2020	EMS - Block 1-20 PHTLS Classroom	General Requirements	Central San Mateo Fire Departments	41-0007	8 hours	
Feb 27, 2020	EMS - Block 1-20 PHTLS Classroom	General Requirements	Central San Mateo Fire Departments	41-0007	8 hours	
Jul 14, 2020	EMS - BLOCK 5-20 - Pediatric Protocol Changes (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Jul 20, 2020	EMS - Block 5-20 - PALS Refresher (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Jul 20, 2020	EMS - Block 5-20 - Peds Toxicology Article (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Jul 20, 2020	EMS - Block 5-20 - Vascular Access Devices (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Jul 20, 2020	EMS - Block 5-20 - COVID-19 in Kids (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Sep 18, 2020	EMS - Block 6-20 - CO Poisoning (Medic and EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	
Sep 25, 2020	EMS - Block 6-20 - Cardiac Arrest Treatment/Documentation Review (Medic CE)	General Requirements	Central San Mateo Fire Departments	41-0007	2 hours	
Oct 15, 2020	BLS-R Online Part 1 (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	2 hours	
Dec 1, 2020	BLS-R Skills Part 2 (Medic & EMT CE)	General Requirements	Central San Mateo Fire Departments	41-0007	1 hours	

Right click on the page to "Save As" (or "download") to your desktop for upload into the application later.

**NEXT: Download your CDL (driver's license) and BLS/CPR card:**

Go back to the **My Credentials** page and click on the **BLS** credential or **CDL**.

## Downloading CDL and BLS/CPR

Click on EMS BLS/CPR or CDL to open the credential.

Central San Mateo County Training Division

Home Administration Calendar Help

**MY CREDENTIALS** [Add Credential](#)

NAME	NUMBER	START DATE	EXPIRATION DATE
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<b>EMS - CPR Instructor</b> EMS Certifications		Feb 1, 2020	Feb 28, 2023
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<b>EMS - ACLS Instructor</b> EMS Certifications	09180718223	Sep 6, 2019	Sep 30, 2021
<b>EMS - PALS</b> EMS Certifications		Sep 30, 2020	Sep 30, 2022
<b>EMS - PALS Instructor</b> EMS Certifications		Sep 25, 2020	Sep 30, 2022
<b>EMS - ACLS</b> EMS Certifications		Nov 1, 2019	Nov 30, 2021
<b>Paramedic</b> EMS Certifications	P18279	Jan 1, 2019	Dec 31, 2021
<b>EMS - CPR</b> EMS Certifications		Dec 1, 2020	Dec 31, 2022

Home Administration Calendar Help

**EMS - CPR**

My Credentials > View Credential: EMS - CPR

EMS Certifications - EMS - CPR **100%**

STATUS	NUMBER	START DATE	EXPIRATION DATE
Active		Dec 1, 2020	Dec 31, 2022

Search:

**All** Completed Training That Applies

No Results

No Results

Click on the paperclip icon to open the credential and then right click to "open in preview". From there you can "save as" or "download" to your desktop.

After you have saved BOTH the BLS/CPR card and your CDL, you will need to download your CE certificate for you annual Narcan, EpiPen and Glucometer Training.

## NEXT: Download your Narcan, Glucometer and EpiPen CE Certificate:

Click on **My History** and use the search bar to find the completion:

### EMS - EMT Narcan/ Glucometer/EpiPen Completion

This single CE certificate gives you credit for all 3 assignments and is necessary as you can only upload 1 document in the renewal application for this requirement.

Central San Mateo County Training Division

Home Administration Calendar Help

**Schedule**

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Battalion Chief Jeff Thorne (650) 558-7625  
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Central San Mateo County Training Division

Home Administration Calendar Help

**MY HISTORY**

narcan

Show Advanced Options

TYPE	NAME	COMPLETION DATE	DETAILS
a	EMS - EMT Narcan Training (EMT CE)	05/13/2021	

Click on the “gold medal” icon to bring up the certificate.

Once the CE certificate opens, right click within the certificate to save it to your desktop.

Central San Mateo County Training Division

Home Administration Calendar Help

**MY HISTORY**

**Certificate**

**EMS - EMT Narcan Training (EMT CE)**

CERTIFICATE OF COMPLETION  
This is to acknowledge that  
**Annie Flick**

This is for one (1) hour of continuing education credits for EMT Narcan Training Online Training. This course has been approved for continuing education by an approved California EMS CE Provider and was online/instructor based. This documentation must be retained for four (4) years. Central San Mateo Fire Departments, California EMS CE Provider #41-0607.

Jeff Thorne  
Battalion Chief  
May 13, 2021  
Date of Training

Central San Mateo Fire Departments  
511 Magnolia Avenue  
Millbrae, CA 94030

Close

Company Training Documentation 04/21/2021

# Image Trend Step-By-Step for EMT Renewal

Website: <https://smchealth.imagetrendlicense.com/lms/public/portal#/login>

Begin by logging into the system:

\*\*\*EMT's who are **NEW** the county, please use "Create New Account" on the home page as you will not be in the system yet.\*\*\*

## Username format:

In general, your username is the first letter of your first name followed by your last name: (ex: aflick)

Use "**Forgot Password**" to log in for the first time **OR** if you forgot what you changed it to.

When you click on the "forgot password" link, you will be prompted to enter your name, work email and date of birth.

- This **generates an email** containing a link to change your password AND contains your username. Once you change your password, you will be automatically logged in to the system.

## NEXT:

In the menu on the left side of the homepage, choose **APPLICATIONS**

San Mateo County Health  
EMERGENCY MEDICAL SERVICES

San Mateo County Emergency Medical Services Licensing Portal  
Certification, Accreditation, and Continuing Education

Welcome, Annie Flick | Logout

**NO!!**

My Account

For more detail about any item, select the links on this page or in the left menu.

Annie Flick  
Paramedic  
Number: P18279  
Issued:  
Expiration: 12/31/2019

No forms pending  
1 Application to be reviewed

I am looking for...  
Personnel  
Certification Number Name Last Name

My Account

Profile  
Issued Application  
Documents

Applications

Service

Lookup

## IMPORTANT!!

**DO NOT** upload any documents until you are **within the renewal application**. If you upload them into "Documents" on the home page, they will sit there for all of eternity and hold up your renewal!

Choose **EMT Renewal Application** from the list of applications

Checkout  
Transaction  
Review 1

Service

Lookup

My Applications | Service Applications

Flick, Annie (P18279)  
EMT-Paramedic  
Expiration Date: 12/31/2019

Applications

CE Provider  
Select this application if you are seeking to become a Continuing Education provider and are headquartered in San Mateo County or are a current authorized San Mateo County Continuing Education provider applying for renewal. [Apply Now](#)

Demographic Change Form  
Use this form to update your demographic information including: Name, address, contact phone number, email address, date of birth, and social security number. [Apply Now](#)

EMT Application  
Select this application if you have never had an EMT certificate in the State of California. The state of California and San Mateo County [Fee: \$125.00] [Apply Now](#)

EMT Application - Lapsed More Than 1 Year  
Select this application to renew your San Mateo County EMT certification if you have lapsed more than 12 months. State of California and San Mateo County Fee - \$125 [Apply Now](#)

EMT Renewal Application  
Select this application if you are an EMT currently certified by a LEMSA in the State of California and are within 6 months of expiring, or have lapsed less than 12 months. State of California and County of San Mateo Fee - [\$87.00]; Renewal without prior LiveScan for San Mateo County - [\$125.00] [Apply Now](#)

Medical Reserve Corps (MRC) Volunteer Initial Application  
Select this application to volunteer with the San Mateo County Medical Reserve Corp. (no fee) [Apply Now](#)

Medical Reserve Corps (MRC) Volunteer Renewal Application  
Select this application to volunteer with the San Mateo County Medical Reserve Corp. (no fee) [Apply Now](#)

Paramedic Accreditation  
Select this application to request accreditation to practice as a paramedic in San Mateo County. You must be affiliated with an ALS provider agency before completing this application. Fee [\$50.00] [Apply Now](#)

Paramedic Reaccreditation  
Select this application to request reaccreditation to practice as a paramedic in San Mateo County. You must be currently accredited as a paramedic in San Mateo County and affiliated with an ALS provider agency before completing this application. [Apply Now](#)

Records 1-9 of 9

## NOTE:

If you are **new to the county** and your previous EMT cert was issued outside of San Mateo County, you **MUST** do a LiveScan in addition to the EMT Renewal Application. Your application will not be processed until your LiveScan is complete. There is a LiveScan form in section 6 of the application. Contact Annie or Wendy for help or suggestions of locations to complete the scan. It may be helpful to do this first to speed up your renewal.

### Section 1: INTRODUCTION AND INFORMATION

Contains Instructions for the application.

**SCROLL** to the bottom and select “ Save and Continue”

### Section 2: APPLICANT INFORMATION

**SCROLL** through the demographic section and complete any required fields that are blank. If you note any incorrect information, you can email the county to fix it after you apply at:

[EMScertifications@smcgov.org](mailto:EMScertifications@smcgov.org)

### Section 3: GOVERNMENT ISSUED PHOTO ID

This section requests you choose one optioned upload the corresponding form of government ID. I would recommend using your CDL.

\*Please select your form of identification

☒ Driver License

☐ State-Issued ID

☐ U.S Passport

☐ U.S. Military ID

☐ U.S. Lawful Permanent Resident Card

☐ U.S. Lawful Permanent Resident Alien Card

\*Driver License State

California

\*Driver License Number

B7198296

\*Driver License Expiration Date

mm/dd/yyyy



Today

\*Please upload a copy of your Driver License

Upload File

\*Name

Document Type

Select Document Type

Keep the name simple:  
“CDL” or “Driver’s License”



## Section 4: EMT RENEWAL QUALIFYING CRITERIA

**CHOOSE** the category that applies to you - for most, it will be “Current EMT”. If out on prolonged DL , indicate how long your card has been lapsed.

The second question asks how you will be submitting your CE hours. **CHOOSE “24 hours of approved CEs”**.

My Account  
Applications  
Continue 1  
Checkout  
Transaction  
Review 3  
Services  
Lookup

Welcome, Annie Flick | Logout

### EMT Renewal Application

< 1 - 3 of 9 EMT Renewal Qualifying Criteria - 4 of 9 Skills Verification, CPR Card, New EMT Skills - 5 of 9 Live Scan Date and ATI Number - 6 of 9 >

#### ▼ Certifying Criteria - EMT

\*Please select which category your renewal falls into:

☒ Current EMT

☐ Expired EMT - less than 6 months

☐ Expired EMT - more than 6 months but less than 12 months

☐ Expired EMT - more than 12 months

Please submit documentation for the Continuing Education Requirement:

A. Approved 24-hour refresher course  
OR  
B. Twenty-four (24) hours of approved continuing education (CE) within the two (2) years prior to application for recertification

\*Indicate which you are submitting:

☐ A. Approved refresher course

☒ B. 24 hours of approved CEs

### NEXT:

- You will be uploading your “Training Transcript” into the application.
- **UPLOAD** your CE Summary Form (from Target Solutions)
- Name the file something simple: “CE Training Transcript”

#### ▼ CE Course Documentation Upload

Upload all CE course certificates, or the approved refresher course certificate, in the section below.  
Documentation (certificates or verifiable transcript) is required for all courses completed.

All CE documentation must contain:

- Your name and certification number
- Course, class, or activity title
- The date(s) of the course
- Total CE hours awarded
- Accreditation name & number (e.g., San Mateo County, other LEMSA, or another accrediting body [CAPCE, etc.])
- Statement if the CE was instructor or non-instructor based (at least 50% of CE must be instructor based)
- Signature of the program director

**Using a training transcript?**

- College transcripts must include your name, college name, and the relevant course number, credits earned, and grade.
- *Transcripts from a CE PROVIDER must include all CE details* (title, hours, date attended, provider, student name, etc.)

**In the File Upload field below, upload a PDF file for all CE Course completion documentation.**  
Applications **will not be processed without full documentation** for all CE hours.

Have more questions? See the EMT CE requirement details:

☐ Yes - show me all CE requirement details

Please upload CE certificate(s) here:

Name

Document Type  
Select Document Type

## Section 5: SKILLS VERIFICATION, CPR CARD, NEW EMT SKILLS

- **TYPE** the name of the person who signed off your EMT Skills Verification Form
- **CHOOSE** their licensure level (likely Paramedic)
- **TYPE** the agency they work for (ex: Central County Fire Department)
- **CHOOSE** (in the drop down menu) what kind of agency they work for (ex: "Fire Department")
- **UPLOAD** the Skills Verification Form

\*Name of person (s) verifying competencies. If more than one, please enter the names of all authorized skills signers)

\*The credentials of the Skills Verifier(s) are (if more than one verifier, please select the highest credential level overall)

☐ EMT

☐ AEMT

☐ Paramedic

☐ MICN

☐ RN

☐ PA

☐ MD/DO

\*Skills Verifier's Agency Affiliation

\*The Skills Verifier(s) is/are affiliated with which type of organization:

Select The Skills Verifier(s) is/are affiliated with which type of organization:

Name of the person who signed your skills form.

Licensure level of the person who signed your skills form.

Agency the person works for (ex: San Bruno Fire Department)

**CHOOSE:** "Fire Department" in drop down menu.

**NEXT:**  
**UPLOAD** your EMT Expanded Scope CE certificate for Narcan/Glucometer/EpiPen Training.

**SELECT** the first bullet point, confirming you completed the training.

**UPLOAD** your Skills Verification Form here.

If you have received training for naloxone, epinephrine auto-injector, and glucometer use **through an approved EMT training program or a California CE provider**, please verify below:

\*I have received specialized training on naloxone, epinephrine autoinjectors, and glucometer use through an approved EMT training program or CE provider:

- ☒ Yes - I have received training on naloxone-epinephrine-glucometer use through an approved EMT training program/CE provider
- ☐ Yes - I have received training on naloxone-epinephrine-glucometer use through an approved EMT training program/CE provider AND provided documentation DURING MY LAST RENEWAL
- ☐ Yes - I received this training in my INITIAL California EMT Course (I finished my EMT course after July 2017)
- ☐ Yes - I hold a CURRENT California Advanced EMT certificate OR Paramedic License
- ☐ No - I have not yet received this training

\*Please upload documentation of naloxone, epinephrine, and glucometer training issued by an EMT training program or CE provider:

 Upload File

\*Name

Naloxone-epinephrine-glucometer training

Document Type

Supporting Documents



**NEXT:**  
**UPLOAD** you BLS/CPR card

**TYPE**  
“AHA” for  
the CPR  
Sponsor/  
Training  
Center

**▼ CPR Card Information**


**Submit a current American Heart Association CPR Card (front and back) OR CPR eCard.**

- San Mateo County EMS requires all EMTs to hold current certification in Basic Life Support CPR.

**Note:**


- Only American Heart Association Basic Life Support CPR cards are accepted.

**\*CPR Expiration Date (MM/DD/YYYY)**

mm/dd/yyyy  Today

**\*CPR Sponsor/Training Center**

**\*Please upload your current CPR card - front and back - as a single PDF below**

 **Upload File**

**\*Name**

CPR Card

**Document Type**


Supporting Documents

## Section 6: LIVE SCAN DATE AND ATI NUMBER

This section asks if you are new to the county or currently certified here.

- If you are **CURRENTLY** certified in San Mateo County, click “yes” and proceed to Section 7.
- If you are **NEW** to San Mateo County, click “No” and follow the directions to download a Live Scan Form.

Anyone who is  
**CURRENTLY**  
certified as an EMT  
in San Mateo  
County

 **SAN MATEO COUNTY HEALTH**  
**EMERGENCY MEDICAL SERVICES**

**San Mateo County Emergency Medical Services Licensing Portal**  
Certification, Accreditation, and Continuing Education

Welcome, Annie Flick | Logout

**My Account**

- Applications
  - Continue 1
  - Checkout
  - Transaction
  - Review 3
- Services
- Lookup

**EMT Renewal Application**


< R Card, New EMT Skills - 5 of 9 **Live Scan Date and ATI Number - 6 of 9** Background Notice and Questions - 7 of 9 Signature Page - 8 of 9 >

**▼ Current Certification Issued By:**

**\*Is your current State of California EMT certification issued by San Mateo County?**

☒ Yes

☐ No

 **Save and Continue**

**\*\*EMT's NEW to the county, follow the directions on the next page.**

For EMT's who are **currently certified in a county OTHER than San Mateo**, please complete the Live Scan ASAP if you have not already done so.

**\*\*\*Your application will be deleted if it is left incomplete for 30 days!!!\*\*\***

▼ Current Certification Issued By:

\*Is your current State of California EMT certification issued by San Mateo County?

☐ Yes

☒ No

\*Which LEMSA issued your current State of California EMT certification?

\_\_\_\_\_

▼ Live Scan Information

Your certification will not be issued without the results of your Live Scan. Please be sure to complete the Live Scan required for EMT certification.

If you haven't submitted a Live Scan application for San Mateo County EMS, the required form can be found below.

Complete the form and make an appointment with any Live Scan service provider in the State of California. See the list at <https://oag.ca.gov/fingerprints/locations>

The ATI number is entered by the Live Scan operator and is indicated by the highlighted area in the form image to the right.

**Note:**

- Live Scans are specific to the entity, so you may be required to submit Live Scans to San Mateo County EMS, California DMV, and other agencies. Live Scans results cannot be shared between agencies under federal law.
- If your only Live Scan has a **DMV logo** on the upper left corner, please complete the **EMS Live Scan form** ASAP (downloadable below)

STATE OF CALIFORNIA  
REQUIREMENTS  
EMT 100 (02/2018)

DEPARTMENT OF JUSTICE  
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REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

A1274  
ORI (live requests only)

Emergency Medical Technician License/Certification  
Authorized Applicant Type

EMT-1 Certified  
Type of License/Certification/Permit (Use Working Title) (Maximum 30 characters - If assigned by DOJ, use exact title assigned)

Contributing Agency Information:  
San Mateo County EMS Agency  
Agency Authorized to Receive Criminal Record Information  
801 Gateway Blvd., Ste. 200  
Street Address (P.O. Box)  
South San Francisco CA 94080  
City STATE ZIP Code

04360  
Mail Code (Five-digit code assigned by DOJ)

Contact Name (mandatory for all school submissions)  
(650) 573-2564  
Contact Telephone Number

Applicant Information:

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Suffix \_\_\_\_\_  
Other Name (AKA or Alias) Last \_\_\_\_\_ First \_\_\_\_\_ Suffix \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex ☐ Male ☐ Female  
Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_  
Place of Birth (Date or Country) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Driver's License Number \_\_\_\_\_  
Billing Number (agency billing number) \_\_\_\_\_  
Min. Number \_\_\_\_\_  
Other Identification Number \_\_\_\_\_

Home Address \_\_\_\_\_  
Street Address or P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Your Number: \_\_\_\_\_ Level of Service: ☒ DOJ ☐ FBI  
(DOJ Number (agency identifying number))

If re-submission, list original ATI number:  
(Must provide proof of rejection)

Original ATI Number \_\_\_\_\_

Employer (Additional response for agencies specified by statute):  
Emergency Medical Services Authority  
Employer Name \_\_\_\_\_  
10901 Gold Center Drive, Ste. 400  
Street Address or P.O. Box  
Rancho Cordova CA 95670  
City STATE ZIP Code

02531  
Mail Code (Five digit code assigned by DOJ)

+1 (916) 632-2433  
Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator \_\_\_\_\_ Date \_\_\_\_\_  
Transmitting Agency \_\_\_\_\_ LSIID \_\_\_\_\_ ATI Number \_\_\_\_\_ Amount Collected/Billed \_\_\_\_\_

ORIGINAL - Live Scan Operator SECOND COPY - Applicant THIRD COPY (if received) Requesting Agency

## Section 7: BACKGROUND NOTICE AND QUESTIONS

This section asks if you have any pending criminal charges, ever had a certification suspended or revoked, if your current certification is presently suspended, etc.

If NO, proceed to the next set of questions, if yes, follow the prompts.

## Section 8: SIGNATURE PAGE

There is a payment section on this page but your home agency will be automatically invoiced upon completion of the application. There is no need to input any personal financial information.

TYPING your password will be considered your signature to complete the application.

## Signature Page and Submission

**EMT Renewal Application**

< R Card, New EMT Skills - 5 of 9 Live Scan Date and ATI Number - 6 of 9 Background Notice and Questions - 7 of 9 **Signature Page - 8 of 9** >

**Payment**

\*Payment Method

☐ Visa/Mastercard/Debit Card

☐ Money Order/Cash

**Signature and Submission**

I hereby certify under penalty of perjury that all information on this application is true and correct to the best of my knowledge and belief, and I understand that any falsification or omission of material facts may cause forfeiture on my part of all rights to an Emergency Medical Technician Certificate, Advanced Emergency Medical Technician Certificate, or Paramedic Accreditation in the State of California.

I understand all information on this application is subject to verification and audit, and I hereby give my express permission for San Mateo County EMS to contact any employer, agency, or any other person for information related to my role and function as an EMT, AEMT, or Paramedic in the State of California.

I agree to assist and cooperate with San Mateo County EMS with any inquiry made:

1. Concerning this application;
2. The documents I have identified or submitted related thereto, and;
3. Related to my EMS system-related employment.

\*Today's Date

mm/dd/yyyy Today

\*Electronic Signature - use the login/password combination

Username: AFlick

Password:

☒ Submit

CHOOSE either payment method as it is a required field but it does not link to any screens for actual payment. Your agency will be billed directly.

**CLICK Submit** (may require 2 clicks)

A "YES / NO" box will appear confirming you wish to submit.

CLICK "YES", a confirmation page will then appear.

# CONGRATULATIONS!!!!

You Made It!!!

Whew!

