



**SREMS  
COUNCIL**

**Susquehanna Regional EMS Council, Inc.**

317 Main Street ▪ Binghamton, NY 13905

Ph 607.699.1367 ▪ Fax 607.397.2728

**Personnel File**

*(To be reviewed and updated annually)*

Ambulance services are required to comply with the provisions set forth in Part 800 of Title 10 (Health) NYCRR. This includes Part 800.21 General Requirements.

**To be included in this file**

- ❑ For **all** Drivers, CFR, EMT and AEMT's
- ❑ Application (which includes)
  - Name, address, telephone, email, etc.
  - Work Name, address, telephone, email, etc.
  - Emergency Contact Information
- ❑ Copy of Drivers License
- ❑ Copy of Drivers License Check
- ❑ Copy of NYS EMS Certifications
- ❑ W-2/I-9
- ❑ Social Security Card copy

Agency Specific:

- ❑ \_\_\_\_\_
- ❑ \_\_\_\_\_
- ❑ \_\_\_\_\_
- ❑ \_\_\_\_\_
- ❑ \_\_\_\_\_