***Please Note: This must be completed when submitting a self-study or in response to a findings letter or progress report.***

**Advisory Committee**

 **Public Member Bio**

**Advisory Committee public member qualifications:** A public member is not employed as an EMS or healthcare provider; is not a member of any trade association or membership organization that is related to the practice of emergency medical services; does not hold a status named in the *Standards* (e.g., a retired physician, retired employer); is not employed by the sponsor of the Paramedic Educational program; is not a relative of an individual who is employed by the sponsor of the Paramedic Educational program; and, does not hold any position with a CAAHEP-accredited program.

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| **CoAEMSP Program Number:**  |
| **Sponsoring Institution/** **Consortium Name:** |
| **City: State:**  |
|  |
| **Public Member Name:** |
| **Date of appointment:** |
| **Occupation:** |
| **If retired, previous occupation:** |

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Experience with or employed by an emergency medical services agency (EMS, fire, law enforcement) |  |  |
| Experience with or employed by a health organization as a clinician  |  |  |
| Related to any employee of the Program sponsor  |  |  |
| Employed by the Program sponsor  |  |  |