SPOKANE COUNTY EMS AWARDS NOMINATION APPLICATION

The office of the Spokane County EMS & Trauma Care Council, and the Spokane County Medical Program Director wants to recognize the outstanding accomplishments of individuals in the EMS community. Please complete this form to nominate an individual or EMS Agency for any of the categories below. The EMS Council's Executive Committee will choose winners annually in April and awards will be presented annually in May.

(Winners will be selected from all nominations submitted prior April 1st of the current year. Any nominations received after April 1st will be nominated for the following year.)

BLS Responder	EMS Agency	ALS Responder
Special Services	Telecommunicator	Instructor
ESSO	Safety	EMS Heroes
Outstanding Lifetime Service		
Nominee	EMS Agency(Last Name)	
(First Name)	(Last Name)	
Address	Zip _	Phone
PLEASE PRINT OR TYPE		
Submitted by:(Planca p	rint name & agency)	Email:
(Flease p	i ini name & agency)	

Please send completed forms to:
Spokane County EMS Office
1610 N. Rebecca St. Spokane, WA 99217
Forms can also be emailed to bvanhout@spokanecity.org