



ALABAMA DEPARTMENT OF PUBLIC HEALTH OFFICE OF EMS

208 Legends Court, Prattville, AL 36066



Candidate Roster Form

Exam Site: _____

Exam Coordinator: _____

Exam Date Requested: _____ PATT # Example: P18005689

Candidate Information

PATT # (List in Numerical Order)	Name	Level
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Contact Us

Contact: Kimmi Wilson
kimberly.wilson@adph.state.al.us

Phone: (334) 290-6228
Fax: (334) 206-0364

Disclosure

Reservation must be submitted to the Office of EMS, no later than 6 weeks prior to the exam. The attached attendees list must contain the candidate name, level, and the PATT number issued by National Registry no later than 3 weeks prior to the exam.

Submit by Fax or eMail. USPS mailing may cause a delay.