

JERRY EVANS, MD  
MEDICAL DIRECTOR

MUSKEGON COUNTY  
MEDICAL CONTROL AUTHORITY

CHAD LAWTON  
ADMINISTRATOR

**Application for Appointment  
Emergency Medical Services (EMS) Advisory Board**

Thank you for your interest in being considered for appointment to the EMS Advisory Board.

**Application Information:**

1. This application must be completed in its entirety and submitted electronically, along with your resume or curriculum vitae, to: [clawton@wmrmc.org](mailto:clawton@wmrmc.org).
2. Incomplete applications will not be considered for appointment.
3. All items marked with a \* are required. All other questions are optional.
4. If you have any questions while completing this application, please contact the Emergency Medical Services Administrator, Chad Lawton at 231-728-1967.

**Personal Information**

Salutation \*First Name Middle Name \*Last Name Suffix (Sr., Jr., etc.)

\*Any other name(s) you have ever used, or have been known by (First, Middle, Last) (If not applicable, enter NA)

\*Address Address 2 \*City \*State \*Zip Code

\*County

Office  Home  Cell  
\*Primary Phone Number

Office  Home  Cell  
Secondary Phone Number

\*Office Email Personal Email

**Licenses & Certifications**

\*Do you currently hold any of the following EMS licenses?

MFR  EMT  Specialist/AEMT  Paramedic  I/C  EMD  N/A

Do you currently hold any other type of license?

\*Do you currently hold any of the following professional certifications?

BLS  ACLS  PALS  EPC  PEPP  PHTLS/ITLS  CC-P  MIH/CP  CADS  
 CACO

Do you currently hold any other type of professional certification?

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**Professional Affiliations**

Are you currently affiliated with any of the following professional organizations?

- |  |  |
|--|--|
| <input type="checkbox"/> Michigan EMS Practitioners Association                | <input type="checkbox"/> National Association of EMS Educators           |
| <input type="checkbox"/> National Association of Emergency Medical Technicians | <input type="checkbox"/> Society of Michigan EMS Instructor Coordinators |
| <input type="checkbox"/> National Association of EMS Physicians                | <input type="checkbox"/> International Board of Specialty Certification  |

Are you currently affiliated with any other professional organizations?

**Additional Questions**

Answering Yes to any of the questions below does not automatically disqualify you for an appointment.

\*Is there any matter in which you are involved in that is or may be incompatible with the discharge of the duties of the position to which you seek to be appointed or that may impair or tend to impair your independence of judgement or action in the performance of the duties of that position?

- Yes     No

\*Have you ever been the subject of a criminal investigation?

- Yes     No

\*Have you ever been disciplined or cited for breach of ethics or unprofessional conduct by or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee, or any other professional group?

- Yes     No

\*Have you ever been convicted of a violation of any federal, state, county, or municipal law, regulation, or ordinance; including traffic violations for which a fine of \$150.00 or more was imposed, this includes driving under the influence of alcohol and/or drugs?

- Yes     No

Please provide an explanation to any Yes answer above: