TRAUMA/EMS SYSTEMS GRANT
TUITION DEFRAYMENT

NORTH DAKOTA DEPARTMENT OF HEALTH
DIVISION OF EMERGENCY MEDICAL SYSTEMS
SFN 53691 (06/2016)

Applicant (Physician, Nurse Practitioner or Physician Assistant)		
First Name	Last Name	MI

The above named practitioner has completed the following course (Check the appropriate box):

☐ Nurse Practitioner (NP) or Physician Assistant (PA) - Advanced Trauma Life Support	$650
☐ Physician - Advanced Trauma Life Support (Full class)	$750
☐ Physician - Advanced Trauma Life Support (Re-certification class only)	$500

Based upon successful completion of the ATLS course, the Hospital listed below has met the requirements of he Division of Emergency Medical System's Grant Tuition Defrayment Policy.

The tuition defrayment as noted above will be sent directly to the Hospital named below.

Date	Hospital EIN		
Hospital Name:			
Street Address / PO Box	City	State	Zip Code
E-mail Address			
Telephone Number	Fax Number		
Authorized Signature		Title	

RETURN COMPLETED FORM TO:

Division of Emergency Medical Systems
ND Department of Health
1720 Burlington Drive
Bismarck ND 58504

ONE FORM PER PERSON ONLY

DEMS USE ONLY

Approved for Payment: 6631-HL 125917-02

☐ NP/PA Advanced Trauma Life Support	$650
☐ Physician Advanced Trauma Life Support	$750
☐ Physician Advanced Trauma Life Support (Recertification)	$500

Total: $_____

Department Approval	Date