Request for Letter of Good Standing and CE Records

Forward TO: Ryan Klavohn & Leah Kucia – Emergency Medical Services

801 South Washington Street

Naperville, IL 60540

Email: Ryan.Klavohn@eehealth.org & Leah.Kucia@eehealth.org

Personal Information			
IDPH License Number	License Expiration Date	EMT-B	EMT-P
Name			
Name			
Address			
61	-1-	Zip	
City St	State		
Home Phone	Cell Phone		
Current Primary Employer			
Please Send a Letter of Good Standing TO:			
Resource Hospital			
Attention			
Address			
City St	ate	Zip	
Fax Number Email Address			
System Status			
Edward Hospital will continue to be my primary system		Yes	No
Edward Hospital will become my secondary system		Yes	No
I am leaving the Edward Hospital system. Please close my file.			
rain leaving the Luwaru Hospital system. Flease close my me.		Yes	No
My primary system will be			
Signatura			
Signature: Date:			
Letters will be mailed/faxed/emailed within five (5) business days			
EHEMSS office use only:			
☐ Mailed ☐ Faxed ☐ Emailed Date: Initial:			