



# McLean County Area EMS System

705 N. East Street  
Bloomington, IL 61701

Phone: (309) 827-4348  
Fax: (309) 827-2017

## EMS System Preceptor Application

### Section-1: APPLICANT INFORMATION *[PLEASE PRINT CLEARLY]*

\_\_\_\_\_  
Last Name First Name MI

\_\_\_\_\_  
Street Address Phone (Home)

\_\_\_\_\_  
City/Town State Zip Code

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
EMS Agency Affiliation

Licensure level and preceptor level:

|                             |                           |                  |
|-----------------------------|---------------------------|------------------|
| <input type="radio"/> EMT-B | State of Licensure: _____ | License #: _____ |
| <input type="radio"/> EMT-I | State of Licensure: _____ | License #: _____ |
| <input type="radio"/> EMT-P | State of Licensure: _____ | License #: _____ |
| <input type="radio"/> PHRN  | State of Licensure: _____ | License #: _____ |

\_\_\_\_\_  
Date initially licensed at selected level

\_\_\_\_\_  
Date of current license expiration

\_\_\_\_\_  
Date initially approved to function within the MCAEMS System

### MCAEMS System Preceptor Requirements:

1. Hold a valid State of Illinois EMT-Basic, EMT-Intermediate, EMT-Paramedic or PHRN license. The candidate shall have practiced at that licensure level within the State of Illinois for at least one year. The candidate shall have practiced at that licensure level within the MCAEMS System for at least six months in order to evaluate and precept entire patient case management as well as serve as a student mentor. An individual that has practiced at their level of licensure within the State of Illinois and the McLean County Area EMS System for three to six months may evaluate and precept for procedures only (e.g. IV therapy, medication administration, airway management, hemorrhage control, etc.).
2. Be a member in good standing with an EMS agency in the MCAEMS System.
3. Not be on probation or suspension with the above EMS agency.
4. Attend the MCAEMS System preceptor workshop.
5. MCAEMS System Medical Director and agency's chief officer approval to participate as a preceptor.
6. Attend updates as needed and presented by the MCAEMS System.
7. Maintain MCAEMS system requirements (**attach copies of all required licenses/certifications**).



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8. Commit to participate in a minimum of 8 hours educational time per year in one or more of the following ways: Perform lectures to EMT-B/I/P students; Teach EMT-B/I/P class skills station; proctor EMT-B/I/P skills testing; teach continuing education lectures (EMT B/I/P); Proctor continuing education skills testing (EMT-B/I/P).
9. Demonstrate above average knowledge and skills by achieving a minimum score of 80% on all System written and practical exams.

## Section-2 ENDORSEMENT

I attest that the above named applicant is qualified to be an MCAEMS System Preceptor based on the prerequisites, is a competent and knowledgeable BLS, ILS or ALS provider and is capable of supervising an EMT-Basic, EMT-Intermediate, or Paramedic student (same level or lower) in the role of a preceptor.

### Agency Chief Office Approval:

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Signature

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Print Name

### EMS Medical Director Approval:

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Signature

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Print Name

***Mail or fax the completed application form and a copy of your current EMT license to:***

**McLean County Area EMS System  
705 N. East Street  
Bloomington, IL 61701**

**Or**

**Fax: (309) 827-2017**

*Note: A MCAEMS System preceptor that transitions to a higher level licensure must submit another MCAEMS System application to precept at the higher level certification.*