

RECOGNITION OF NON-KANSAS CREDENTIALS

Are you EMS Provider certified in another state that would like to become an EMS Certified Provider in Kansas? Have you upgraded your EMS Provider Scope in another state and want to upgrade your certification in Kansas? Complete this application to become certified in Kansas. *NOTE: If not currently or previously certified in Kansas you must submit a Waiver for a Criminal History Records Check prior to submitting this application.*

To apply, you must first create an account in the Kansas Board of EMS licensing portal <https://www.kemsis.org/lms/public>.

Before we get started - Please make sure that you have the ability to upload copies of all the following documents that are applicable to you.

- Copy of your current EMS certification/license for each state
- Copy of your National Registry of EMTs certification card
- If a current U.S. armed service's member, a letter from your Commanding Officer stating you are in good standing
- If a former U.S. armed service's member, a copy of your most recent DD-214.

First locate the Recognition of non-Kansas Credentials by clicking on “Applications”, then “View My Applications”.

Kansas Board of Emergency Medical Services
License Management Public Portal

KBEMS | Agency Lookup

Welcome, JOHN TEST | Logout

My Account

- Applications
- Continue 1
- Checkout
- Transaction
- Review 17

Training

Services

Lookup

Available Applications

Click "View My Applications" to view all personnel applications, or click "View Service Applications" to view available service licenses for this login.

TEST, JOHN (E1234567)
EMT
Issue Date: 06/28/2021
Expiration Date: 12/31/2022

View My Applications

BOARD of EMS (KS-155)
900 SW Jackson Room 1031, Topeka, Kansas 66612
Initial Course of Instruction - EMR, Initial Course of Instruction - EMT, Initial Course of Instruction - AEMT, Initial Course of Instruction - Paramedic, Continuing Education
- Long Term Program Provider, Continuing Education - Single Course Request - Issued: 04/10/2019

View Services Applications

Find “Recognition of Non-Kansas Credentials” in the list of available applications and click “Apply Now”.

Recognition of Non-Kansas Credentials

Are you EMS Provider certified in another state that would like to become an EMS Certified Provider in Kansas? Have you upgraded your EMS Provider Scope in another state and want to upgrade your certification in Kansas? Complete this application to become certified in Kansas. *NOTE: If not currently or previously certified in Kansas you must submit a Waiver for a Criminal History Records Check prior to submitting this application.*

Apply Now

Review the information about this application and documents that may need to be uploaded to complete the application. Click on "Save and Continue".

01-125 Recognition of Non-Kansas Credentials 22-01

Disclaimer Info - 1 of 5 | Tell Us About You - 2 of 5 | Non-Kansas Credentials Entry and Upload - 3 of 5 | Criminal History - 4 of 5 | Ackr >

Information

Before we get started - Please make sure that you have the ability to upload copies of all the following that are applicable to you.

- Copy of your current EMS certification/license for each state
- Copy of your National Registry of EMTs certification card
- If a current U.S. armed service's member, a letter from your Commanding Officer stating you are in good standing
- If a former U.S. armed service's member, a copy of your most recent DD-214.

If you do not have either of the first two items, this is not the right application for your situation.

After submitting this application, you will be asked to proceed to payment. Your application will not be processed until this payment has been successfully submitted.

All applicants not previously certified in Kansas must submit a fingerprint card, completed 3-page waiver and fee for a criminal background check prior to issuance of any EMS certification.

Last bit - If you do not complete and submit this application in its entirety (payment included) within 30 days, the application will be considered withdrawn and you will have to start over.

LET'S GET STARTED!!

←

Answer the EMS Provider questions. If you indicate that are a member of the military, you will be reminded that you will need to upload a letter from your C.O. indicating the you are in good standing.

Disclaimer Info - 1 of 5 | Tell Us About You - 2 of 5 | Non-Kansas Credentials Entry and Upload - 3 of 5 | Criminal History - 4 of 5 | Ackr >

EMS Provider Questions

*What level of Kansas EMS provider certification are you applying for?

EMR EMT AEMT Paramedic

*Have you ever been or are you currently certified in the State of Kansas?

Yes No

Kansas Statute regarding occupational licensing requires us to ask you the following questions:

*Have you established or do you intend on establishing residency in Kansas?

Yes No

*Are you a current member of any branch of U.S. armed services, U.S. military reserves, or national guard in any state?

Yes No

You will need to upload a copy of the letter from your Commanding Officer indicating you are in good standing on the next page.

*Did you complete your EMS training through any branch of the U.S. armed services?

Yes No

If you answer "No" to the current military question, you will be asked if you are a former member of the military. If you answer "Yes", you will be reminded that you will need to upload a copy of your most recent DD-214.

*Are you a former member of any branch of U.S. armed services, U.S. military reserves, or national guard in any state?

- Yes
- No

You will need to upload a copy of your most current DD-214 showing you have an honorable discharge on the next page.

*Did you complete your EMS training through any branch of the U.S. armed services?

- Yes No

If you indicate “No” to both military questions, you will be asked if you are the spouse of a current or former member of the military:

*Are you the spouse of a current or former member of any branch of U.S. armed services, U.S. military reserves, or national guard in any state?

Yes No

If you were required to gain NREMT certification by your branch of the military, you will be reminded that you will need to upload a copy of your NREMT license. If you indicate that you currently hold a license or certification from another state you will be reminded of the need to upload a copy of THAT card (or cards if more than one).

*Did your branch of the armed services require you to obtain and/or maintain NREMT certification?

Yes

No

You will also be asked to upload a copy of your National Registry of EMTs card (current or expired) on the next page.

*Do you currently hold a license or certification from another state at the level you are applying for?

Yes

No

You will need to list and upload a copy of your current license or certification for each state you hold a license or certification on the next page.

You will also be asked to upload a copy of your National Registry of EMTs card (current or expired).

If you indicate that you DO NOT hold a license or certification from another state, you will receive this message. Please exit the application as it is not applicable for you.

*Do you currently hold a license or certification from another state at the level you are applying for?

Yes

No

You have indicated that you do not have a current license or certification to practice EMS in the United States. Please contact the Kansas Board of EMS at 785-296-7296 and ask for the Certification Section. You will have additional steps to complete before being eligible for EMS certification in Kansas.

If you hold a license, certification, or credential as a non-EMS health provider please let us know in the Allied Health Information section.

▼ Allied Health Information

*Do you also hold a current certification/license as any of the following: physician, physician assistant, advanced practice RN, RN, respiratory care practitioner, or respiratory therapist?

Yes

No

Certification Levels

Physician Physician Assistant Advanced Practice RN RN Respiratory Care Practitioner Respiratory Therapist

Certification Status

Current

Expiration Date

12/31/2023



Today

Certification/License Number

04123456

Certifying State

Kansas

Click "Save and Continue"

▼ Allied Health Information

*Do you also hold a current certification/license as any of the following: physician, physician assistant, advanced practice RN, RN, respiratory care practitioner, or respiratory therapist?

Yes

No

Save and Continue ↑

Please enter all previous and current state EMS certifications/licenses. If more than one, Click "Add Another". Complete the information for each state and Click "Done". Repeat until you have indicated all of the states in which are or previously have been certified.

▼ Non-Kansas Credentials Entry

Please enter **ALL** previous and current state EMS certifications/ licenses below.

State	License Number	Expiration Date
<input checked="" type="checkbox"/> Missouri	123456	December 31, 2023
<input type="checkbox"/> Illinois	7891011	December 31, 2024

Add Another ←

*State
Illinois

*State License/Certification Number
7891011

*State Expiration Date
12/31/2024 Today

Done ←

In this section upload copies of all documents as required. Enter a Name for the document and a Document Type. Click "Upload File".

As promised, here is where you upload the copies applicable to you:

- Each state certification/license card
- NREMT certification card
- For current U.S. armed service's members, a letter from your Commanding Officer stating you are in good standing
- For former U.S. armed service's members, a copy of your DD-214

You can add multiple items in the section below. Select "Upload File" and complete the information. To upload the next, select "Add Another" below. You may repeat this process for multiple additions or you may upload a single document that holds all required information.

*File

Upload File ←

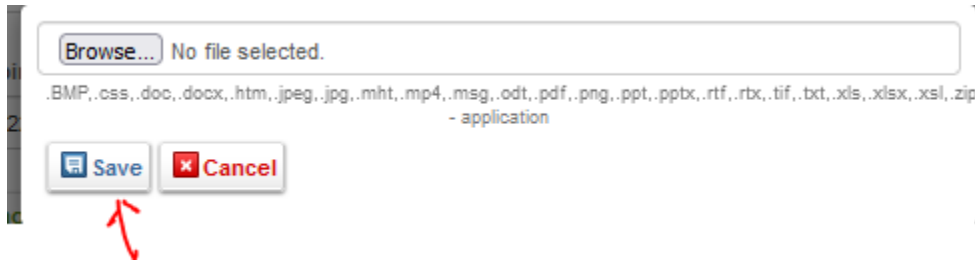
*Name
MY NREMT CARD

Document Type
Certification Cards

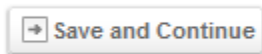
Remove

Add Another

Browse to the location on your computer where the copy of the document you wish to upload is stored and click Save. Click "Add Another" for each additional document. Repeat the upload process as needed.



Click "Save and Continue".



Complete the Criminal History Questions, then Click "Save and Continue". If you answer "Yes" to any of these questions you will be asked to complete a separate Legal Questionnaire.

A screenshot of a web application interface showing a progress bar at the top with five steps: 'Disclaimer Info - 1 of 5', 'Tell Us About You - 2 of 5', 'Non-Kansas Credentials Entry and Upload - 3 of 5', 'Criminal History - 4 of 5', and 'Acknowledge'. The 'Criminal History - 4 of 5' step is active. Below the progress bar is a section titled 'Criminal History Questions' with a dropdown arrow. The text reads: 'ALL applicants must answer the following questions.' There are five questions, each with a radio button for 'Yes' and 'No':

- *Have you ever been convicted of a felony? (No is selected)
- *Are criminal proceedings, either felony or misdemeanor pending in any federal, state or municipal court? (No is selected)
- *Is an investigation and/or disciplinary action pending against any professional or occupational licensure, certification or registration? (No is selected)
- *Has any professional or occupational license, certification or registration ever been denied, revoked, suspended, limited or disciplinary action taken by a licensing authority of any state, agency of the US government, territory of the US or country? (No is selected)
- *Are you currently on or are you required to register on any state offender registry as part of any criminal sentencing? (No is selected)

At the bottom of the form is a 'Save and Continue' button with a right-pointing arrow icon. A red arrow points to this button.

Enter your initials to acknowledge the information you provided in this application is true and correct. Entering your password serves as your electronic signature. Click "Submit".

1 of 5 | Tell Us About You - 2 of 5 | Non-Kansas Credentials Entry and Upload - 3 of 5 | Criminal History - 4 of 5 | Acknowledgement - 5 of 5

Applicant Acknowledgement

I declare under the penalty of perjury under the laws of the State of Kansas that the information provided in this application is true and correct.

*Please enter your initials in the box provided that you acknowledge the above statement.

Username: jtest

Password:

Submit 

You must pay any applicable fees and complete the Legal Questionnaire (if required) for your application to be complete.

