

Panhandle Regional Advisory Council – TSA – A

Senate Bill 8 Scholarship Program Affidavit of Eligibility

_____, a DSHS licensed EMS Provider within TSA-A, is applying for funds from the Panhandle Regional Advisory Councils EMS Workforce Recruitment & Retention Program funded by the Texas Department of State Health Services (DSHS) through Senate Bill 8 as a qualified agency servicing a rural and/or underserved county or area as defined below. Please check all that apply:

Rural: A County or Area with less than 50,000 in population

County: _____

City: _____

Underserved: An area in a urban or metropolitan county (50,000 or more in population), where the minimum level of EMS care does not exist:

County: _____

City: _____

Please indicate how the funds will be used to increase ambulance staffing and response capabilities with the EMS Providers Service Area. (check all that apply)

- Provide Ambulance response coverage to an area where service does not exist
- Increase the number of EMS certified personnel actively working on an ambulance
- Retain the number of currently certified EMS personnel
- Place additional ambulance response units in service area
- Improve ambulance response times system wide
- Improve ambulance response times to a particular location. _____
- Other: _____

Provide details indicating why funds are needed and how funds will be used to increase ambulance staffing and response capabilities. Attach addition information as needed:

As the duly authorized agency representative, I attest and/or certify that the represented EMS sponsor agency meets the qualifications to receive funding as an agency service a rural and/or underserved county or area, as defined. Additionally, I understand that as a recipient of these federally sourced funds, my agency is subject to future audit and may be required to provide additional information, records, and/or reports upon request and as needed for verification by appropriate authorities.

EMS Sponsor agency representative signature

Ems Sponsor agency representative Printed name

Date: _____