



## **SOUTHEASTERN MINNESOTA EMERGENCY MEDICAL SERVICES**

1130 ½ SEVENTH STREET NW | SUITE 201 | ROCHESTER, MN 55901  
OFFICE: 507-536-9333 | FAX: 507-536-9337 | WWW.SEEMS.COM

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### **REGIONAL TRAINING SUBSIDY**

#### **APPLICATION FOR TRAINING FUNDS REIMBURSEMENT**

#### **FISCAL YEAR 2026**

*July 1, 2025 - June 10, 2026*

Regional EMS funds are again available for FY 2026 to First Responder Agencies in Southeastern Minnesota for the following courses: **Emergency Medical Responder Initial and Recertification, Emergency Medical Technician Initial and Recertification** courses as well as **departmental CPR recertification courses**. An agency can apply for Training funds, to meet the training needs, of both new and current members.

Below is the allocation per person for each program:

**Emergency Medical Responder Initial Certification (\$200)**  
**Emergency Medical Responder Recertification (\$100)**  
**Emergency Medical Technician Certification (\$300)**  
**Emergency Medical Technician Recertification (\$150)**  
**CPR Certification (\$40 per provider)**

**Effective 01 July 2025, BLS ambulance services who are using Emergency Medical Responders on their service CANNOT apply for the SE EMS Education Subsidy. They are however, now eligible for the Education Reimbursement through the Office of Emergency Medical Services with new legislative changes and education reimbursement programs.**

**NOTE:** Acceptance of application does not guarantee payment for **ALL** requests for reimbursement. Eligible reimbursements are paid on a first come, first served basis until the funds allocated for the fiscal year have been depleted. ***(\$500 per Service Maximum)***

Subsidy application must be accompanied by PAID Invoice or receipt of class expenses.  
***SE EMS Courses cannot be subsidized through this Education Subsidy.***

**PLEASE PRINT LEGIBLY AND COMPLETE ALL APPLICABLE SECTIONS**

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Organization

Primary Contact

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Address

City

State

Zip Code

County

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Telephone Number

Email



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### **Number of individuals trained for following classes:**

EMR Certification \_\_\_\_\_ EMR Recertification \_\_\_\_\_  
EMT Certification \_\_\_\_\_ EMT Recertification \_\_\_\_\_  
CPR Certification \_\_\_\_\_

### **GENERAL INFORMATION**

1. Last First Responder Course offered: \_\_\_\_\_
2. Training institution: \_\_\_\_\_
3. Number of current certified members: \_\_\_\_\_
4. Approximate number of runs per year: \_\_\_\_\_
5. Does Service use run report forms: YES  NO  Source: \_\_\_\_\_
6. Does service have direct radio communications with ambulance service: YES  NO
7. Does service have regular meetings/training sessions: YES  NO

***Application can be returned via fax or mail;  
(Fax: 507-536-9337 or email: office@seems.com)***

***Your service will receive notice of Subsidy award and Course Rosters must be turned into the  
SE EMS Office prior to June 6, 2026.***

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Signature

Date