



Saskatchewan Jurisprudence Declaration

I, (*print name*) _____, am applying for a license to practice in Saskatchewan as an:

(*check one*) EMR EMT EMT-Advanced EMT-Paramedic.

I declare that I have reviewed the following documents (*which can all be found on the SCoP website*) and understand the legislative framework and protocols relevant to practice in Saskatchewan.

- *Paramedics Act of Saskatchewan*
- *Regulatory Bylaws Pursuant to the Paramedics Act*
- *SCoP Administrative Bylaws*
- *Saskatchewan Health Emergency Treatment Protocols Manual*
- *SCoP Continuing Medical Education Requirements* (relevant for Renewal of License to Practice)

Signed on (date) _____ at (city) _____ .

Practitioner Signature

Witness (may not be signed by a relative or by one sharing the same address)

Address : _____

Witness Address: _____

Phone: _____

Witness Phone: _____