



# Georgia Office of EMS and Trauma Medic Payment Form

This form is used to submit a mailed payment for personnel licensure fees. You must complete the online application at <https://www.mygemsis.org/lms> PRIOR to submitting a payment using this form.

MEDIC/APPLICANT NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SSN (last 4): \_\_\_\_\_

License Number (if renewal): \_\_\_\_\_

Application Type:

Initial/Reinstatement License Fee	License Renewal (prior to expiration date)	Late License Renewal
<b>\$75.00</b>	<b>\$75.00</b>	<b>\$150.00</b>

Application Level – Circle One      **EMT**    **EMT-Intermediate\***    **AEMT**    **CT\***    **Paramedic**

*\*EMT-Intermediate and CTs are for renewals only.*

**Mailed payments for medic licensure must either be a money order, business check or cashier’s check. No other payment will be accepted. Payments must be made payable to “Georgia Department of Public Health”.**

**Please complete this form and mail it and your payment to:**

**Georgia Office of EMS and Trauma  
ATTN: Payment for (list your name here)  
1680 Phoenix Blvd, Ste 200  
Atlanta, GA 30349**

**Applications will not be processed until payment is received in FULL.**

Deposited:	Scanned:	Uploaded to LMS:
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