

Certificate of Completion

Joe Smith

#P0000 (paramedic state license # or EMT-1 county certification #)

Has Successfully Completed

Class Name

on Date

Administered by CE Provider Agency Name

This activity has been approved for XX **hours of continuing education** by an approved California EMS CE Provider and was instructor based.
This document must be retained for a period of four years.

Instructor

Date

California EMS CE Provider # 40-XXXX

CE Provider Agency Name

Address

This is a sample course certificate. Please adapt or create a course certificate that will best meet the needs of your organization.