

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

National Registry of Emergency Medical Technicians
6610 Busch Blvd, Suite 200
Columbus, OH 43229

Dear NREMT Application Review Committee,

I am writing to formally submit my application for the National Registry of Emergency Medical Technicians (NREMT) certification as an Emergency Medical Technician (EMT). I have completed an accredited EMT training program and fulfilled all required prerequisites for this certification. Enclosed with this letter, please find the following documents:

1. Completed application form
2. Copy of my EMT training program completion certificate
3. Proof of CPR certification
4. Application fee payment receipt
5. [Any other supporting documents]

I am eager to take the next step in my EMS career and demonstrate my knowledge and skills through the NREMT examination. Thank you for considering my application. I look forward to your prompt response.

Sincerely,

[Your Name]
[Your EMT Training Program Name]
[Your EMT Program Director's Name, if applicable]