

# TP-C<sup>®</sup> Program Recognition Application



Thank you for participating in the TP-C<sup>®</sup> Recognition Program. Recognition by the BCCTPC<sup>®</sup> is an acknowledgement of your commitment to high standards in transport profession.

*By completing this form, you attest to 100% of your employed Tactical Paramedics are Tactical Paramedic Certified (TP-C<sup>®</sup>).*

Company/Base Name: \_\_\_\_\_

Company/Base Address: \_\_\_\_\_  
(include city, state and zip code)

Company/Base Manager: \_\_\_\_\_

Application Submitted by (if different from above): \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

## Check which type of plaque you need:

12 Plate Plaque

24 Plate Plaque

### Office Use Only

Process Date: \_\_\_\_\_

Order #: \_\_\_\_\_

Date Mailed: \_\_\_\_\_

**IMPORTANT:** Please list Certified Tactical Paramedics on the following page. After completing all information, click 'Submit Application'. For any questions, contact Jeanette Myers at [jmyers@bcctpc.org](mailto:jmyers@bcctpc.org), or call 678-368-4929.

Submit Application

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Tactical Paramedic Name

TP-C<sup>®</sup> No.

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