



**Fort Carson's
Medical Simulation Training Center
24-Hour Medic Sustainment
Registration Form**

Medic Sustainment is a 3-day advanced skills familiarization course designed for 68W's that have completed TC 8-800 requirements and require 24 additional CEU's. Current TCCC and PFC standards and practice will be integrated into POI. The course consists of advanced trauma management skills and students must have validated their Table VIII (preferably at FT. Carson) within the last year prior to attendance.

[Medical Simulation Training Center: Fort Carson \(army.mil\)](http://www.fortcarson.army.mil/medical-simulation-training-center)

Class Dates: _____ to _____

Last Name: _____ **First Name:** _____ **MI:** _____ **Rank:** _____

SSN: _____ **PMOS:** _____ **ETS:** _____

Full Unit (Brigade, Battalion, Company): _____

Duty Phone: _____ **Personal Phone:** _____

Military Email: _____ **Civilian Email:** _____

Type of Certification: EMT EMT-A EMT-P (Circle One) **Expiring:** _____

When did you last attend TC8-800 Training? _____ **Where?** _____

COMPONENT (please circle one) RA / AR / NG / Other: _____

I understand that class starts at **0800** on the first day of class, **building 2130**. Failure to be present at that time and date will cause me to be dropped and my Platoon Sergeant, First Sergeant, or Commander will be notified. Repeated tardiness or **missing more than 1 hour** will result in my being dropped from the course. Uniform for training is ACU's or duty uniform.

Signature: _____

PLATOON SERGEANT

Last Name: _____ **First Name:** _____ **Rank:** _____

Email: _____ **Phone:** _____

Signature: _____

UNIT COMMANDER or FIRST SERGEANT is the approving authority and validates that the above Soldier will attend this course and that this is their designated place of duty during the above dates.

The above-named Soldier has unit authorization to attend the course on the above dates and has no further additional duties or obligations during the course (CQ, SDO, etc.) and will not miss any training time.

Commander/First Sergeant Name: _____ **Phone:** _____

Commander/ First Sergeant Signature: _____