



EMA Licensing Curriculum Educational and Medical Review

Agency or Course Provider:

License Level:

To be completed by submitting agency Note: Items with an (MO) following the item description are subject to additional EMALB Medical Oversight Review (see detailed explanations in Program Submission Criteria)				For EMALB Use Only		
	Program Submission Criteria	Training Agency Compliance	EMA Legislation, Regulation and Policy Compliance	Education Content Approved	Medical Practice Approved	EMALB Notes
1	Meets or exceeds NOCP Goals (MO)					
2a	Meets or exceeds NOCP Criteria (MO)					
2b	Meets or exceeds BC Specific Criteria (MO)					
3	Meets Competency Assessment Criteria (MO)					
4	Method for verifiable student achievement data					
5	Training Agency Safety Policy					
6	FOI Compliance					
7	Student Record Access Policy					
8	Instructor Qualifications (MO)					

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9	Instructor Ratios					
10	Learning Resources (MO)					
11	Student Appeal Policy					
12	Program Evaluation Policy					
13	Subcontractor Agreement Policy					
14	CMA Accreditation Process (MO)					
15	Program Medical Advisor(s) NOTE: Please attach additional names and information if required	Name:				
		Contact Information:				
	Submitted by:	Title:	Date:	EMALB Reviewer Name		Signature:
	Agency:			EMALB Reviewer Name		Signature:
				Title:	Date	EMALB Reviewer Name

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Signature:			Title:		Date
			EMALB Medical Reviewer Name		Signature:
			Title:		Date
EMALB Recommendation:					