

Academic Ride-Along Schedule

Ride-Along Student Name: _____ Affiliation: _____

Medic #: _____ Ride Date: _____ Hours: _____ Scheduled by / Date: _____

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Medic #: _____ Ride Date: _____ Hours: _____ Scheduled by / Date: _____

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To setup additional ride along dates:

1. Visit www.charlestoncounty.org/departments/ems/ridealong to view the schedule (your instructor can provide the current username and password).
2. Find an opening on the schedule that meets your hour and location needs.
3. Email emsridealong@charlestoncounty.org with your desired date/time, or ask your instructor to add you to the schedule.
4. Hand-write your ride along dates above for tracking purposes. Please hold on to this copy of the form.