

Wear the shoulder patch that lets people know you are an **EVT Certified Technician.**



When you successfully complete your first EVT exam, you will receive an EVT Shoulder Patch. If you would like to purchase extra patches, submit this order form with your remittance. You must meet the EVT qualifications for certification to purchase and wear EVT patches and rockers. Patches will be mailed directly to the EVT Certified Technician.

Patches and rockers have a blue background with black lettering, except for Master Fire and Master Ambulance Rockers which have a gold background. **Please note that only EVT Certified Technicians may order patches for the level or test area that they have successfully completed.**

**EVT Shoulder Patch Order Form**

Technician's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Quantity	Total	<u>Exam Rockers cont.</u>	Qty	Total
EVT Certified Patch _____ @ \$4 = _____		Allison Transmissions _____ @ \$3= _____		
<u>Level Rockers</u>		Ambulance Technician _____ @ \$3= _____		
Level I _____ @ \$2 = _____		Ambulance Electrical _____ @ \$3= _____		
Level II _____ @ \$2 = _____		Ambulance HVAC _____ @ \$3= _____		
Master Fire _____ @ \$2 = _____		Ambulance Body & Chassis _____ @ \$3= _____		
Master Ambulance _____ @ \$2 = _____		ARFF Technician _____ @ \$3= _____		
Master ARFF _____ @ \$2 = _____		ARFF Chassis _____ @ \$3= _____		
LE Vehicle Tech _____ @ \$2 = _____		Extinguishment Systems _____ @ \$3= _____		
		Advanced Electrical Systems _____ @ \$3= _____		
<u>Exam Rockers</u>	Qty	LE Vehicle Installation _____ @ \$3= _____		
Fire Apparatus Technician _____ @ \$3= _____	Total	Management 1 _____ @ \$3= _____		
Fire Pumps & Accessories _____ @ \$3= _____		Illinois residents add 8% sales tax \$ _____		
Fire Electrical Systems _____ @ \$3= _____		<b>Total</b> \$ _____		
Aerial Fire Apparatus _____ @ \$3= _____				

Make checks payable and mail or fax to:  
**EVT Certification Commission, Inc.**  
**P. O. Box 894**  
**Dundee, IL 60118**  
 847-426-4075 Fax 847-426-4076

Method of Payment: ___ Visa ___ MasterCard ___ Money Order ___ Check	
Credit Card # _____	Exp Date _____
Signature _____	Date _____