



Monterey County EMS Agency

Policy 4512 B

Law Enforcement Intranasal Naloxone Program Application

Applicant Information

Agency: _____ Date: _____

Address: _____
Street Address

City State ZIP Code

Phone: _____ Email _____

Law Enforcement Agency Point of Contact

Name: _____ Title: _____

Email: _____ Phone: _____

Attachments to Submit

Please attach your agency's training course outline as outlined in **Monterey County EMS System Policy #4512**.

Email application and attachments to:

Kimberley Hernandez, EMS Analyst
Hernandezk4@co.monterey.ca.us