

**REGION I**  
**Emergency Medical Services**  
5890 RD 5  
Kanorado KS 67741  
Phone/Fax 785-399-2763  
Cell 785-821-2615  
Email: [gwinter@st-tel.net](mailto:gwinter@st-tel.net)  
Website: [www.ksemsregion1.com/](http://www.ksemsregion1.com/)

Greetings,

Region I EMS Council is sponsoring scholarships to the KEMSA Conference, August 13-16, 2026 at the Hilton Garden Inn & Convention Center in Manhattan KS.

Scholarship attendees are asked to provide a report (written or in person) or a copy of your certificate of attendance. **Those not providing one of these options will not be eligible to apply for a scholarship for 1 year.**

The scholarship will include up to a full conference registration (Friday, Saturday, Sunday) and three nights of motel accommodations (Thursday, Friday, Saturday). The Region Council will pay these expenses prior to the KEMSA Conference

You will receive an email confirming that your KEMSA Scholarship application has been received. THIS DOES NOT MEAN YOU HAVE RECEIVED A SCHOLARSHIP, it simply states that your application has been received and will be reviewed by the Council. Please watch your email, confirming your application has been received. If you do not receive an email confirmation, please contact the cell number listed above.

Scholarship selection will be completed by May 22, 2026 and all applicants will be notified via email whether successful or not.

Applications are also available on the Region I website: [www.ksemsregion1.com](http://www.ksemsregion1.com)

APPLICATION DEADLINE: May 18, 2026, 5:00 PM.

Please circulate this application and letter to everyone in your service.

Respectfully,  
Gary Winter  
Region I EMS Coordinator

## KEMSA Conference Application

Region 1 is sponsoring scholarships for EMS professionals to the KEMSA Conference. You can find the full schedule online at [KEMSA.org](http://KEMSA.org).

Following are the guidelines:

1. Names will be drawn for attendees.
2. Gary Winter, Region 1 Coordinator will make all conference registrations and motel accommodations.
3. Upon your return from the conference, you must submit to the Region a copy of your certificate of attendance or a report of the conference. The report may be done in person or by written document or technology activity. Failure to complete one of these options will result in the applicant being ineligible for future scholarships for a period of 1 year.
4. APPLICATION DEADLINE IS MAY 18, 2026.
5. Applicant must be in good standing and active in a Region 1 Service.

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Name: \_\_\_\_\_ Service Association \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Phone number \_\_\_\_\_

Service level:    EMR        EMT        AEMT        Paramedic

Service type:    Volunteer        Full-time

Other service:    Director        Trainer        Attendant

KEMSA member:        Yes        No

Previous attendee to KEMSA:        Yes        No

Other conferences attended \_\_\_\_\_

What do I wish to gain from attending the KEMSA Conference?

\_\_\_\_\_  
\_\_\_\_\_

Mail, email (preferred) or fax application to:  
Region I EMS Council  
5890 Rd. 5  
Kanorado, KS 67741  
[gwinter@st-tel.net](mailto:gwinter@st-tel.net)  
fax: 785 399-2763

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EMS Personnel signature:

The EMS Personnel that is making this application to Region 1 Council is an active member of my service and is in good standing.

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Service Director