



Allied Health Continuing Education (AHCE)
EMS REGISTRATION FORM

Office use only – Term/CRN: _____

STEP 1: Complete the Allied Health Continuing Education Application Form.
You can also access the form by scanning the QR Code with your phone camera.



STEP 2: To be registered for the course: Email, mail, or deliver in person this completed form (Do not FAX).

CONTACT AHCE

Call: (361) 582-2412

Email: AHCE@VictoriaCollege.edu

Mail or In-Person: VC Main Campus • 2200 E. Red River Street, Victoria, TX 77901 • Health Sciences Center, Suite 136

For office hours and to view the current schedule, visit www.VictoriaCollege.edu/AHCE.

Need to Purchase a Required Text Book (if applicable)? YES / NO (Circle One)

Student V# Course Title (Required) Date of Class(es) (Required)

Last Name First Name MI Primary Phone #

Social Security Number Date of Birth

Mailing address City, State, Zip County of Residence

Email address (Required)

PAYMENTS

Payment can be made online through the Pirate Portal or in-person at the VC Payments Office located in the Student Services Building. Payment instructions will be emailed to you along with your receipt.