

Transportation Request Form

IMPORTANT: PLEASE READ BEFORE SUBMITTING

Non-Emergency Medical Transportation (NEMT) services are available exclusively to individuals enrolled in the Refugee Medical Assistant (RMA) and ORR-Funded Medical Assistance (OFMA) Programs. Eligibility will be verified prior to approval. Please note that these services cannot be utilized for medical appointment with providers or services not covered by RMA/OFMA.

A minimum of three (3) business days' notice is required for all trip requests. Please be aware that sensitive information will be included in the request form, it is essential to encrypt the email prior to submission to protect the client's privacy. To request transportation services, please complete the provided form and submit to rmtransportation@refugees.org. For any service inquiries, please contact the Support Services Coordinator at 1-800-688-7338.

PERSON REQUESTING

FIRST AND LAST NAME:

Click or tap here to enter text.

EMAIL ADDRESS:

Click or tap here to enter text.

PHONE NUMBER:

Click or tap here to enter text.

PATIENT'S INFORMATION

FIRST AND LAST NAME:

Click or tap here to enter text.

PHONE NUMBER:

Click or tap here to enter text.

A NUMBER:

Click or tap here to enter text.

EMAIL ADDRESS:

Click or tap here to enter text.

TYPE OF SERVICE:
ONE WAY / ROUNDTRIP:

Select an option

SEDAN / WC VAN / GROUND AMBULANCE:

Select an option

TRIP INFORMATION

PICK-UP TIME
TIME (HH:MM)

HH: MM

AM/PM

Select an option

APPOINTMENT TIME
TIME (HH:MM)

HH: MM

AM/PM

Select an option

RETURN TRIP
PICK-UP TIME
(IF ROUNDTRIP)
TIME (HH:MM)

HH: MM

AM/PM

Select an option

DATE

Click or tap to enter a date.

PICK-UP ADDRESS

Click or tap here to enter text.

DROP-OFF ADDRESS

Click or tap here to enter text.

TYPE(S) OF MEDICAL SERVICES

Select a service

(Revision Date: 05/20/2026)

(Please complete back of form, if applicable)

RECURRING TRIP REQUEST (if applicable):

IS THIS A RECURRING APPOINTMENT THAT YOU WOULD LIKE TO REQUEST RECURRING NEMT FOR?

Select an option

DAY OF THE WEEK: (IF THE PICKUP TIME IS DIFFERENT FOR EVERY TRIP, PLEASE SUBMIT EACH REQUEST INDIVIDUALLY)

MON TUE WED THU FRI SAT SUN

LAST DATE OF SERVICE:

Click or tap to enter a date.

COMMENTS

COMMENTS/NOTES:

Click or tap here to enter text.

(Revision Date: 05/20/2026)