PARAMEDIC PROGRAM Fall 2023 Application Online Submission

To: Prospective Paramedic Student

FROM: Amanda Ward, EMT- P, BS

Paramedic Program

SUBJECT: 2024 Fall Paramedic Program (Class 105)

Thank you for your interest in the Crafton Hills College EMT-Paramedic Program. Crafton Hills College Paramedic Program has the longest continuous accreditation of any public institution in California. The program received its initial accreditation in 1985, at which time the accreditation committee awarded a full five year accreditation. Crafton Hills has maintained its excellent record and continuous accreditation.

This application is for the Fall 2024 paramedic program. The program will run from January 2024 until December 2024. It is divided into three distinct sessions of didactic, clinical, and field. The didactic session will meet Tuesday through Thursday, and occasional Mondays, August 2024 through December 2024. The clinical component will be held January 2025 through April 2025. The field component will be held from May 2025 through July 2025.

The entrance process has three specific steps: application, testing, and selection. To be granted a testing position each candidate must correctly complete the application form and submit all required documentation.

The EMS Department will accept applications until 4:00 p.m. on Monday, June 10th, 2024.

For instructions on submitting your completed packet, please email program assistant —

Ashley Bryson (AsBryson@craftonhills.edu). The department will not accept email or hand delivery of the application materials. Any materials received after 4:00pm June 12th will not be considered.

Following the accepted application, candidates will be contacted to schedule their written tests. The written tests will be given June 25th, 26th, and 27th, 2024. Each of these tests is by individual appointment. The written testing will consist of EMT-Basic, and anatomy/physiology. Following successful completion of the written testing process, each candidate will be invited to participate in the program. If more candidates successfully complete the process than there are available program positions, the positions will be selected by our established selection process, but this is an uncommon occurrence. Read the attached pages carefully and if you have any questions, please contact the program assistant at AsBryson@craftonhills.edu.

The Crafton Hills College has the longest continuous accreditation of any public institution in California. Crafton Hills College received its initial accreditation in 1985 and has maintained its excellent reputation and continuous accreditation. The Crafton Hills Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

Commission on Accreditation of Allied Health Education Programs 9355 - 113th St. N, #7709
Seminole, FL 33775
727-210-2350
www.caahep.org

To contact the CoAEMSP: 8301 Lakeview Parkway, Suite 111-312 Rowlett, TX 75088 214-703-8445

Fax: 214-703-8992 www.coaemsp.org

ENTRANCE REQUIREMENTS

- 1. A current California EMT-Basic card issued by the State of California
- 2. Current BLS Healthcare Provider card from American Heart Association
- 3. Written documentation, on original company or agency letterhead, of completion of six months full-time or 1,000 hours of part-time experience as an EMT-Basic, paid or volunteer, prior to the application deadline. This documentation will usually come from your employer(s) or previous employer(s), and should be signed by an operations supervisor or manager, training officer, fire captain or fire chief.
- A copy of a high school diploma or GED. If you do not have a copy of your diploma, an official transcript showing your graduation date from high school will be accepted.
- 5. Official, sealed transcripts showing successful completion of transferable Anatomy and Physiology course(s). The course must meet transfer requirements for either the CSU or UC system. It can be a single semester or two-semester course but must cover BOTH the anatomy and physiology of the entire human body and MUST INCLUDE A LAB SECTION. If you are enrolled in an A & P course at the time you submit your application, we will accept a registration print-out or unofficial transcripts as proof of enrollment; however, you must submit official transcripts showing successful completion of the A & P course with a "C" or better prior to the start of the program.
- 5. Completion of the Pre-Entrance Medical Clearance Form within the last six months. This form must be completed and signed by a physician and include a stamp from the physician's office.
- 6. All vaccinations on the attached sheet of Vaccination Requirements must be completed. Strictly follow the timelines. Your vaccinations will NOT be acceptable to our clinical providers if they do not match the required timelines.
- If you have any questions regarding medical testing / records, please contact Ashley Bryson via email (AsBryson@craftonhills.edu).

*Vaccination Requirements

MMR - Measles, Mumps, Rubella

•Must show proof of (2) MMR immunizations **or** <u>Positive</u> titers for all three (MMR) (Quantitative titer)

Varicella Series (VZV)

• Must show proof of (2) immunizations **or** <u>Positive</u> titer (Quantitative titer)

TDaP – tetanus, diphtheria, pertussis

• Must be within the last 10 years

Hepatitis B Series

• Must have proof of all (3) shots in the series **or** <u>Positive</u> titer (Quantitative titer)

*Requirements are subject to change based on clinical sites.

Middle



Your Future is on the Rise

APPLICANT: _

PARAMEDIC PROGRAM PRE-ENTRANCE MEDICAL CLEARANCE FORM

First

| Reason for Referral: | | | |
|--|---------------------------|---|--|
| | amedic Program requires t | on in the Crafton Hills College that students be able to complete with no restrictions: | |
| Good physical s Strength Walking Lifting Pushing Climbing Stooping Crouching Reaching | | Endurance Standing Sitting Carrying Pulling Balancing Kneeling Crawling Rotational Movement | |
| Repetitive Move | ement | Eye-Hand- Foot Coordination | |
| Must be able to sit for extended periods of time, up to 8 hours per day, 4 days a week in he classroom environment; stand for up to 16 hours in the clinical environment and sit for 24 to 72 hours in the field environment. Must be able to work 24 hours to 72 hour continuous shifts Motor coordination is necessary for the well- being of the patient, the Emergency Medical Technician and co-workers over uneven terrain | | | |
| Must be able to safely carry patient while balancing equipment, negotiating stairs and uneven terrain | | | |
| | | dual is free to participate in the estamped by physician's office) | |
| Physician Signature | | Phone | |
| Physician Name | | Date | |
| Agency_ | | | |
| J, | | | |
| | | | |

PROGRAM TESTING REQUIREMENTS

- 1. Successful completion of the written EMT-Basic competency exam with a score of 80% or higher.
- 2. Successful completion of the written Anatomy & Physiology competency exam with a score of 80% or higher.

HELPFUL HINTS FROM PAST APPLICATION PROCESSES

- 1. Submit all information together in one packet. Before submitting, double check that all information requested has been included.
- 2. Follow the sequence specified.
- 3. The EMT-Basic certification is the card issued by the state. (Not the paper course completion certificate.)
- 4. You must have <u>completed</u> your experience <u>prior</u> to submitting your application.
- 5. You **must** get Quantitative titer results <u>or</u> vaccinations <u>before</u> you enter the program. Do not wait until the last minute for vaccinations.
- 6. All certifications and vaccinations must be kept current throughout the program.
- 7. Study the EMT-Basic and A & P study guides.
- 8. No one receives preferential treatment.
- 9. Email Ashley for help if you need it. We will be more than happy to review your application prior to submission to verify that it is complete.

APPLICATION COVER SHEET

RETURN TO: Ashley Bryson

Important: Any applications not received via the online submission portal by the posted due date/time will not be considered.

PLEASE ENTER THE FOLLOWING INFORMATION:

| NAME: | | | |
|------------------------------|---|--|--|
| ADDRESS: | | | |
| CITY: ZIP CODE: | | P CODE: | |
| PHONE: | | | |
| STUDENT ID NUMB | BER: | DOB: | |
| EMAIL: | | | |
| The following list must i | | emplete application. Your application | |
| Copy of your El | MT-Basic Card (state) | | |
| Copy of BLS He | Copy of BLS Healthcare Provider Card from American Heart Association | | |
| (Unofficial acce | Official, Sealed Transcripts of your transferable Anatomy & Physiology course (Unofficial acceptable until admitted to the program) Original letter of experience (on original agency letterhead, signed by an Operations | | |
| | nager, Training Officer, Fire Capt gh school diploma or GED | tain or Fire Chief) | |
| Copy of your pr | oof of (3) vaccinations against h | Hepatitis B <u>or</u> Positive TITER results | |
| Copy of your p | Copy of your proof of (2) vaccinations against MMR (Measles, Mumps, Rubella) (2 | | |
| shots) <u>or</u> Positi | ve TITER results | | |
| Copy of your pr | oof of (2) vaccinations against \ | /aricella (VZV) <u>or</u> Positive TITER results | |
| Copy of your va | accination of TDap (given within | the last 10 years) | |
| Completed Pre- | -Entrance Medical Clearance Fo | orm stamped by Physicians office | |
| Copy of Curren | t Resume | | |