



Dear Emergency Medical Technology Applicant:

Thank you for your interest in the Emergency Medical Technology program at Co-Lin. The Emergency Medical Technology program at Co-Lin prepares students for careers in the fast-paced and challenging field of emergency medicine. The Emergency Medical Technology program offers three exit points for students to choose:

- Technical Certificate, Emergency Medical Technician (EMT)
- Technical Certificate, Paramedic
- Associate of Applied Science degree in Emergency Medical Technology - Paramedic

The EMT course is a one-semester course (8 semester hours) that covers topics related to patient assessment, emergency medical conditions, and appropriate medical care of the sick and injured. Successful completion of the EMT course allows the student to sit for the National Registry of Emergency Medical Technicians (NREMT), EMT Exam.

The Paramedic portion of the Emergency Medical Technology program prepares students for entry-level practice as an advanced emergency medical care professional. There are two exit points for Paramedic. Students who successfully complete three semesters of Paramedic core content can exit with a Technical Certificate in Paramedic. Students who wish to finish with an Associate of Applied Sciences degree in Emergency Medical Technology – Paramedic complete 12 more hours of academic coursework. Successful completion of the Paramedic core content allows students to sit for the NREMT Paramedic Exam.

Courses are designed to instruct students in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains necessary to be competent healthcare providers. **The program draws its students from individuals already possessing a valid EMT state certification and having completed Anatomy & Physiology I with a grade of C or better. Students must complete Anatomy and Physiology II with a grade of C or better to be eligible to continue past the first semester of the paramedic core curriculum.**

In addition to meeting all other Co-Lin admissions requirements, you are also responsible for completing the items listed below, in order to be considered for enrollment in the Emergency Medical Technology program.

1. If you are not currently a Copenhaven-Lincoln Community College student, you must complete the College Application and return it to College Admissions.
2. Must be 18 years of age upon entrance into the program.
3. Must have ACT score of 16 or higher.
4. Complete and return an Emergency Medical Technology application packet:

For EMT:

Due by August 1st for fall semester, January 1st for spring semester

- Emergency Medical Technology Application
- Technical Standards Form
- Health Occupations Examination Report
- Signed Hepatitis B Policy
- Student Health Survey
- Proof of AHA Healthcare Provider CPR
- Drug and Alcohol Testing Acknowledgement Form
- Background Information Signature Form

For Paramedic:

Due by October 1st each year

- Emergency Medical Technology Application
- Technical Standards Form
- Health Occupations Examination Report
- Signed Hepatitis B Policy
- Student Health Survey
- Proof of AHA Healthcare Provider CPR
- Drug and Alcohol Testing Acknowledgment Form
- Background Information Signature Form
- Proof of NREMT certification as EMT
- Two letters of recommendation from people familiar with work ethic/performance, not related to applicant, citing their relationship with applicant, (pastor, friend, employer, etc.).

5. For Paramedic: Interview and acceptance by the Emergency Medical Technology Selection Committee is required. Acceptance will be based on completed Emergency Medical Technology Application Packet, ACT score, GPA, and an interview by the selection committee. Admission to the program is on a competitive basis. EMT graduates must submit a new Application Packet for consideration into Paramedic Program.

If accepted, all applicants must participate in drug and alcohol testing and a criminal history background check at their expense.

Copiah-Lincoln Community College does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or other factors prohibited by law in any of its educational programs, activities, admissions, or employment practices.

**COPIAH-LINCOLN COMMUNITY COLLEGE
EMERGENCY MEDICAL TECHNOLOGY APPLICATION**

DATE: _____ ACT Composite Score: _____ ACT Science Score: _____

Applicant's Name _____ Social Security # _____

Date of Birth _____ Telephone # _____

Address _____

Emergency Contact _____ Telephone # _____

Last grade completed _____ Name & Address of School _____

Have you had any health occupation training? _____ Explain _____

Have you had any health occupation work experience? _____ Explain _____

Have you attended any paramedic programs? _____ If so, where _____

_____ and how much _____

Have you ever been convicted of a crime other than a traffic violation? ____

If so, briefly explain: _____

Describe your general health status _____

State any current physical or mental problems _____

List all medications you currently take _____

Do you have medical or hospitalization insurance? _____

Do you have a history of drug/alcohol abuse problem? _____

Do you have a history of mental or emotional illness? _____

(Applicant's signature)

(Witness signature)

**COPIAH-LINCOLN COMMUNITY COLLEGE
TECHNICAL STANDARDS ACKNOWLEDGMENT
EMERGENCY MEDICAL TECHNOLOGY PROGRAM**

EMS providers work in unpredictable, high-stress environments. Work tasks can be physically and emotionally demanding. Providers are expected to rapidly absorb, analyze, and interpret information in order to make decisions that affect patient care. In order to successfully complete the Paramedic Program, students must demonstrate the ability to perform under realistic situations.

The following technical standards, and essential skills and functions, must be met with or without accommodation (See ADA policy in Student Handbook):

1. Must be able to communicate effectively via telephone or radio equipment,
2. Ability to lift, carry, and balance up to 100 pounds (200 pounds with assistance) on level ground, uneven terrain, and stairs,
3. Be able to effectively receive and interpret oral, written, and diagnostic form instructions in the English language,
4. Have the ability to use good judgment and remain calm in high stress situations,
5. Ability to perform medication calculations under high stress situations,
6. Ability to knowledgeably operate complex advanced life support equipment under high stress situation,
7. Ability to be unaffected by loud noises and flashing lights,
8. Ability to read English language manuals,
9. Ability to interview patients, their families, and/or bystanders to obtain critical information dealing with mechanism of injury or nature of illness,
10. Ability to document, in writing or computer-based documentation system, all relevant information in a format that takes into account legal and ethical issues,
11. Ability to converse, in English, with coworkers, nurses, physicians, and other medical professional in regards to the status of their patient,
12. Possess good manual dexterity with the ability to perform all tasks related to the highest quality of patient care,
13. Ability to bend, stoop, and crawl on uneven terrain,
14. Ability to withstand varied environmental conditions such as extreme heat, cold, and moisture,
15. Ability to work with other providers to make appropriate patient care and treatment decisions,

- 16. Must demonstrate a professional demeanor and behavior, and must perform all aspects of work in an ethical manner in relation to peers, faculty, staff, and patients,
- 17. Must adhere to the codes of confidentiality,
- 18. Must conform to appropriate standards of dress, appearance, language, and public behavior, and
- 19. Must show respect for individuals of different age, ethnic background, religion, and/or sexual orientation.

In addition, the student must follow all established policies and procedures of the program and clinical affiliate sites.

I understand the Technical Standards and feel that I can achieve the Technical Standards described above for the Emergency Medical Technology Program.

PLEASE CHECK:

_____ I do not require special accommodations for the above Technical Standards requirements.

_____ I do not require special accommodations for the above Technical Standards requirements.

Please list: _____

 Applicant's Signature

 Date

Copiah-Lincoln Community College does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or other factors prohibited by law in any of its educational programs, activities, admissions, or employment practices. The following offices have been designated to handle inquires and complaints regarding the non-discrimination policies of Copiah-Lincoln Community College.

Questions, complaints, or requests in regard to Title IX directives should be made to the Title IX Coordinator, Dr. Brenda Brown Orr, The Thames Conference Center, 1084 Lake Drive, Wesson, MS 39191, (601) 643-8671.

Questions, complaints, or requests in regard to Section 504 directives should be made to: Wesson Section 504 Coordinator, Jordan Burt Stephens, Henley Building, Lester R. Furr Dr., Wesson, MS 39191, (601) 643-8401; or Natchez Section 504 Coordinator, Tiffany Woods, Redd Watkins Career and Technical Building, 30 Campus Drive, Natchez, MS 39120, (601) 446-1168; or Simpson Section 504 Coordinator, Beverly Barnes, Sidney Parker Academic Building, 151 Co-Lin Dr., Mendenhall, MS 39114, (601) 849-0121.

**COPIAH-LINCOLN COMMUNITY COLLEGE
HEALTH OCCUPATIONS EXAMINATION REPORT
PAGE 1 OF 2**

Direction to Health Care Provider. I am an applicant for a Health Occupations Education Program at Copiah-Lincoln Community College. This is to authorize you to send to the school all the information requested.

Witness: _____ Signed: _____
Name of Applicant

Name: _____ Phone: _____

Street: _____ City: _____ State: _____

Height: _____ Weight: _____ Age: _____

Past Health History: _____

HEALTH EXAMINATION

Ears: Condition: R _____ L _____ Hearing: R _____ L _____

Eyes: W/glasses: R _____ L _____ Without Glasses: R _____ L _____

Nose: _____ Sinuses: _____ Throat: _____

Thyroid: _____ Lungs: _____ Heart: _____ B/P: _____

Skin: _____ Abdomen: _____ Hernia: _____

Posture: _____ Feet: R _____ L _____ Back _____

TB Test: Date: _____ Findings: _____

(If positive, must complete a pulmonary history survey attached.)

NOTE: SEE NEXT PAGE TO COMPLETE

**COPIAH-LINCOLN COMMUNITY COLLEGE
HEALTH OCCUPATIONS EXAMINATION REPORT
PAGE 2 OF 2**

Immunizations: Hepatitis #1 _____ Date: _____
 Hepatitis #2 _____ Date: _____
 Hepatitis #3 _____ Date: _____
 Rubella _____ Date: _____
 Rubeola _____ Date: _____
 Varicella _____ Date: _____

(May attach copies of TB skin test and immunization records)

Does the applicant have a history of drug abuse? Yes _____ No _____

Does the applicant have a history of alcohol abuse? Yes _____ No _____

Does the applicant have a history of mental or emotional illness? Yes _____ No _____

Explain any physical findings or conditions that would prevent applicant from rendering service in health occupations education.

Is applicant taking any routine prescribed medications?

Is applicant's health satisfactory to perform duties in the field for which application is made?

Yes _____ No _____

Signed: _____ **M.D./N.P.** Date: _____

Address: _____

**COPIAH-LINCOLN COMMUNITY COLLEGE
BACKGROUND INFORMATION SIGNATURE FORM
EMERGENCY MEDICAL TECHNOLOGY PROGRAM**

All Health Science students who will be providing direct patient care in health care institutions regulated by the MS Department of Health should be aware that Mississippi law requires background checks for individuals seeking employment in a health care facility.

According to the Mississippi State Law, an individual may not be eligible for employment in a health care agency if the criminal history record check discloses a felony conviction, guilty plea or plea of nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-33-23 (f), child abuse, arson, grand larceny, burglary, gratification of lust or aggravated assault, or felonious abuse and/or battery of a vulnerable adult that has not been reversed on appeal or for which a pardon has not been granted.

Students are asked to submit a signed, notarized Healthcare Criminal History Background Affidavit as part of the admission requirement. If a student is unable to sign the affidavit and would like to continue with the application into the Emergency Medical Technology Program, an appointment should be made with the Emergency Medical Technology Program Director to discuss the circumstances of the felony.

Once accepted into the program, it is the student's responsibility to immediately notify the Emergency Medical Technology Program Director in writing of any subsequent changes in criminal history that occur after the Affidavit has been notarized or after the Criminal Background Check has been completed. Failure to do so may result in immediate withdrawal from the program.

Students admitted to the Emergency Medical Technology Program may be required to complete additional paperwork and pay additional fees related to the background check requirement.

Students assigned to some clinical affiliates may also be required to have additional background checks to comply with specific clinical affiliation contracts which may include criminal record check, credit check, driving history check and license check.

Students must be able to attend clinical affiliation sites in order to meet the requirements of the Emergency Medical Technology Program. If a student is found to be ineligible for clinical placement any time during the program, the student is unable to meet clinical learning objectives and will be withdrawn pending resolution of the situation.

I have been informed of the MS State Law requiring background checks for individuals providing direct patient care in health care institutions regulated by the MS Department of Health.

I hereby give permission for Copiah-Lincoln Community College to conduct background checks with the Mississippi Department of Public Safety, Federal Bureau of Investigation, and any other persons to determine my suitability in working in Health Occupations.

Signature of Student

Date

Signature of Witness

Date

*Completed form turned in with your application information.

**This form must be signed by a witness to the applicant's signature for this form to be complete. I hereby give permission for Copiah-Lincoln Community College to conduct background checks with the Mississippi Department of Public Safety, Federal Bureau of Investigation, and any other persons to determine my suitability in working in Health Occupations.

Falsification of any information on this application will constitute grounds for nonacceptance into this program or dismissal from the program if applicant has been accepted.

I certify that all of the information given here is truthful.

Signature of Applicant

Date

Please return to:

Emergency Medical Technology Program
Copiah-Lincoln Community College
30 Campus Drive
Natchez, MS 39120

**COPIAH-LINCOLN COMMUNITY COLLEGE
DRUG TESTING ACKNOWLEDGMENT FORM
EMERGENCY MEDICAL TECHNOLOGY PROGRAM**

Consistent with Co-Lin's Code of Conduct (6), and the Drug-Free School Policy located in the Co-Lin Student Handbook, the Emergency Medical Technology Program has zero tolerance for the use of illicit drugs, including, but not limited to cannabis (marijuana.), hallucinogens, cocaine/crack, amphetamines, methamphetamines, barbiturates, opioids, benzodiazepines, etc. All students enrolled in the program are required to submit to drug and/or alcohol screening. The student is responsible for the costs of the test.

Students are also subject to random drug tests. Presence of illicit drugs, no matter how minute, will result in immediate dismissal. Presence of prescription drugs, which affect the student's ability to meet program requirements, without notifying the instructor of their use, will also result in immediate dismissal.

Students suspected of alcohol abuse or consumption while attending class or clinical will be subject to testing. Any detectable result will result in immediate dismissal.

Readmission consideration will be based on current program and Co-Lin policies.

I have been informed of the above information regarding Copiah-Lincoln Community College's policies regarding the use of illicit drugs and/or alcohol.

I hereby give permission for Copiah-Lincoln Community College to conduct alcohol and/or alcohol screening.

Signature of Student

Date