

## Gateway Community and Technical College Paramedic Program Application

Date: April 24, 2012

Dear Applicant,

Thank you for your interest in the Paramedic Technology Program at Gateway Community and Technical College! The classes are offered in the evening to provide students opportunity to work or take classes during the day. The course meets the National Highway Traffic Safety Administration (NHTSA) National Paramedic Standards, approved by the Kentucky Board of Emergency Medical Services. Upon successful completion of the course, you will be eligible to sit for the National Registry Emergency Medical Technician (NREMT) Paramedic Exam.

Paramedic classes will begin Tuesday, August 14, 2012, will be held on the Edgewood Campus, and will complete August, 2013. Classes will be held on Tuesday and Thursday evenings from 5:30 pm – 9:30 pm. Students will be required to complete clinical rotations through a wide variety of pre-hospital and intra-hospital settings. These can be completed weekdays during business hours, evenings, or on weekends.

All students who apply to the paramedic program are required to complete the attached paramedic application (please type the application), have a current EMT-B certificate, be accepted into the college (if not currently a student at Gateway, see instructions below regarding applying to the college), possess a current CPR card, and have a valid driver's license. In addition, after completion of the application, individuals will need to attend a pre-admissions meeting (date to be announced).

**After acceptance** into the program, students must provide documentation of all immunizations and vaccinations (flu vaccine is required in order to attend certain clinical rotations), have a physical exam form signed by a physician verifying that an applicant can perform duties, pass a drug screening and criminal background check, and purchase liability insurance through Gateway **prior to the first day of class** (all of this information will be explained in your acceptance packet).

Applications for the paramedic program are being accepted in the Allied Health Office (E204), on the Edgewood Campus, from April 24, 2012 through August 1, 2012. Individuals will be accepted on a rolling basis. If you have questions, please contact us. We are here to help you reach your career goals.

Sincerely,

Dawn L. Bloemer, RN, EMT-P, MPH  
Paramedic Program Coordinator  
859-442-1151  
[Dbloemer0001@kctcs.edu](mailto:Dbloemer0001@kctcs.edu)

Robbie Meek, CCEMT-P, CICP, PNCCT-P, NRP, NCEE  
Paramedic Education Director  
859-912-0995  
[rmeek0006@kctcs.edu](mailto:rmeek0006@kctcs.edu)

## APPLICATION REQUIREMENTS

### **Application Requirements (needed now):**

- \_\_\_\_\_ Have applied and been accepted to Gateway Community & Technical College (if not already a student, go to Gateway's website to apply: <http://www.gateway.kctcs.edu/Admissions>).
- \_\_\_\_\_ Possess a current Kentucky or National Registry EMT B certification on file; must be maintained throughout the duration of the program (include copy with application)
- \_\_\_\_\_ Must be at least 18
- \_\_\_\_\_ Hold a valid driver's license (include copy with application)
- \_\_\_\_\_ Must have current CPR card on file (include front and back copy with application)
- \_\_\_\_\_ Be able to complete (if haven't already) co-requisite courses (Anatomy and Physiology (BIO 135), and/or Medical Terminology (AHS 115), and/or math).
- \_\_\_\_\_ Complete application enclosed (please type)

### **Once accepted into the program (needed later), the following are due by the first day of class:**

- \_\_\_\_\_ Immunizations, which include:
  - Proof of second dose of MMR vaccine or titer
  - Hepatitis B
  - TDaP (Tetanus, Diphtheria, Pertussis)
  - Current TB skin test (within two months of the first day of clinical)
  - Varicella (chickenpox) vaccine or titer
  - Flu vaccine (prior to entering clinical in the fall)
- \_\_\_\_\_ Physical exam form signed by a physician verifying that an applicant can perform duties
- \_\_\_\_\_ Proof of liability insurance
- \_\_\_\_\_ Background check
- \_\_\_\_\_ Drug screening

### **The admission process consists of:**

- Application Review
- Acceptance of candidates on rolling basis
- Attendance of pre-admissions meeting (date to be announced)

### **Mail or drop off typed applications at the following location:**

Gateway Community & Technical College  
Paramedic Program  
Colleen Heneghan, Allied Health Administrative Assistant  
Office E204  
790 Thomas More Parkway  
Edgewood, KY 41017

**Please call or email Dawn Bloemer, Paramedic Program Coordinator, at 859-442-1151 or [dbloemer0001@kctcs.edu](mailto:dbloemer0001@kctcs.edu) with questions.**

# GATEWAY COMMUNITY & TECHNICAL COLLEGE

## Paramedic Program Application

Please complete the following Paramedic Program Application by typing responses. Please print and mail application or drop off application, along with supporting documentation, to:

Gateway Community and Technical College  
 Paramedic Program  
 Colleen Heneghan, Allied Health Administrative Assistant  
 Office: E204  
 790 Thomas More Parkway  
 Edgewood, KY 41017

Students will be accepted into the program on a rolling basis. Applications will be accepted April 24, 2012 through August 1, 2012.

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Primary Phone	Secondary Phone		
E-mail Address			
Birthdate			
Are you a currently certified EMT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Expiration Date:
Are you currently certified in CPR?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Expiration Date:
Are you over the age of 18?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Do you have a valid driver's license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

REFERENCES	
<i>Please list two professional references (non-family members; this can be co-workers, instructors, bosses, etc.).</i>	
<b>Full Name</b>	Relationship
Company	Phone (     )
Address	
<b>Full Name</b>	Relationship
Company	Phone (     )
Address	

**PREVIOUS EMS EXPERIENCE**

*If you have worked in EMS as a volunteer or have been paid, please include the name of your Fire/EMS agency.*

<b>Company</b>		Phone (    )	
Address		Supervisor	
Job Title	From:	To:	
<b>Company</b>		Phone (    )	
Address		Supervisor	
Job Title	From:	To:	

**FOR APPLICATION TO BE COMPLETE:**

\_\_\_ Please ensure that you have applied and have been accepted into Gateway Community and Technical College and have taken the Compass Test or submitted your ACT

\_\_\_ Include this application

\_\_\_ Include a copy of your CPR card

\_\_\_ Include a copy of your EMT card

\_\_\_ Include a copy of your driver's license

After application is received in the Allied Health Office, potential students are to:

- Attend pre-admissions meeting (time to be announced)

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

Signature

Date