



Emergency Services Program



# Application Packet

## **2023** ***EMT/AEMT to Paramedic*** ***Program***

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**THIS APPLICATION SERVES TO PLACE THE CANDIDATE ON A WAITING LIST FOR THE PROGRAM ANTICIPATED TO BEGIN JUNE 8th, 2023 AND END MAY 3<sup>rd</sup> 2024. CLASSES WILL BE EVERY THURSDAY AND FRIDAY 9a – 5pm. CANDIDATES WILL BE RANKED BY DATE OF APPLICATION SUBMISSION AND SCORE ON THE PRETEST.**

***TUITION FOR THIS PROGRAM IS \$6,950. Tuition cost covers instruction, textbook, E-text, clinical tracking, and testing fees.***

**SCHOLARSHIP: Students enrolling in this course MAY be eligible for a scholarship from the Virginia Office of EMS. More information can be found at:**

**<https://www.vdh.virginia.gov/emergency-medical-services/education-certification/ems-scholarship/>**

**It is the student's responsibility to review the guidelines to determine eligibility and apply for the program if he/she chooses to do so. The RUC Emergency Services Program and Western Virginia EMS Council, Inc. do not play any role in the application, approval, or issuance of said scholarship and are not responsible for a student receiving or not receiving funds in any way.**

**Please be sure read through entire application, if you have any questions, please contact Mike Garnett: 540.562.3482 or email [mgarnett@vaems.org](mailto:mgarnett@vaems.org). Email is generally the best contact method.**

## Application Instructions/Checklist 2023

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### **IMPORTANT – READ CAREFULLY**

**APPLICANTS ARE NOT CONSIDERED FOR THE PROGRAM UNTIL ALL OF THE REQUIRED DOCUMENTATION HAS BEEN SUBMITTED TO THE WESTERN VIRGINIA EMS COUNCIL.**

***The following items are required to qualify for entrance in the EMT/AEMT to Paramedic program:***

- Pass the **baseline entrance examination**.
- Review the **Admission Policy and Enrollment Requirements**
- Complete the **ENTIRE ALS Course Application**.
- Submit the **ALS Course Application** to the Western Virginia EMS Council, c/o Mike Garnett. Submission of the following items and completion of a baseline entrance exam, are to be no later than the **deadline of close of business on Thursday May 25th, 2023.**

***The following items are required to complete the ALS application package for the program:***

- Copies of the following:
  - a. Driver's license/other Government issued photo ID
  - b. High school diploma OR General Equivalency diploma OR evidence of post-secondary education (copy of diploma, unofficial transcripts are acceptable).
  - c. Current American Heart Association (AHA) BLS certification. If the applicant holds CPR certification from another organization, that can be submitted now but they will have to get AHA BLS certified.
  - d. VAOEMS EMT and/or AEMT certification card
  - e. Copies of ALL EMS badge course cards for which you are certified (PHTLS, ACLS, etc)
- Completed **Recommendation for ALS Program** form. Recommendation forms must be completed by your agency chief operational/training officer **AND** endorsed by your agency Operational Medical Director.

***Tuition must be paid by prior to the beginning of the course. Emergency services agencies or other organizations can be invoiced for the tuition. Students who are delinquent in payment of the course fees will be subject to dismissal from the program.***

# Admission Policy and Enrollment Requirements

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The RUC-WVEMS Training Program will not discriminate in its admission policies on the basis of sex, race national origin, color, creed, disabling conditions, handicaps, age, religion or sexual preference. To be successful in this program students must be highly motivated and dedicated to the program. All applicants must meet the minimum requirements and provide documentation prior to entry into an Advanced Life Support program.

Applicants must provide documentation of minimum requirements prior to entry into the EMT- Paramedic program.

## **For entrance into all programs:**

1. The applicant must meet the minimum requirements specified in the Virginia Emergency Medical Services Regulations section **12 VAC 5-31-1460, ALS student requirements.**
2. The applicant must hold a current and approved certification in CPR.
3. Applicants should be affiliated with an EMS agency.
4. Non-affiliated applicants will be permitted, providing the class is not at maximum capacity.
5. The applicant shall complete an EMT knowledge baseline examination.

## **12 VAC 5-31-1460. ALS student enrollment requirements.**

An enrolled student in an ALS certification program shall comply with the following:

1. Be proficient in reading, writing and speaking the English language in order to clearly communicate with a patient, family or bystander to determine a chief complaint, nature of illness, mechanism of injury, to assess signs and symptoms and interpret protocols.
2. Be a minimum of 18 years of age at the beginning date of the certification program.
3. Certification as an EMT or higher EMS certification level.
4. Possess a High school or general equivalency diploma.
5. Have no physical or mental impairment that would render the student or provider unable to perform all practical skills required for that level of certification, including the ability to function and communicate independently and to perform appropriate patient care, physical assessments and treatments.

## GENERAL COURSE POLICIES:

1. No more than **15% of required course hours** absence is allowed in this program for any reason (for the overall program). Students missing more than the maximum hours allowed will be dropped from the course.
2. All Students must maintain at least a 70% average overall for the course to be considered passing to be allowed to continue in the program and for student participation in any and all certification processes.
3. There is NO refund provided after the first day of class, for any reason or circumstance.
4. All students must pass each module exam within two (2) attempts. A student will be subject to dismissal for failing three (3) module exams.
5. All students must consent to a criminal history and drug screening in order to participate in clinical and field internship components of the program. Starting and completing any clinical or field rotations, and thus completion of the program, is contingent upon a NEGATIVE drug screen for specified substances. Confidentiality will be maintained at all times in accordance with RUC/WVEMS Council Student Drug Testing Policies.
6. All students **must** complete the Student Health and Clinical requirements within 30 days of the beginning of the program. Failure to do so will result in program dismissal without refund.
7. Students must successfully complete **all** aspects of the program (classroom, clinical and field internship). It is especially important to understand that you must attain the **minimum required number of all** clinical “competencies” to complete the program.
8. Students will receive a detailed syllabus and program handbook at the beginning of the program. These documents contain all of the information regarding requirements to successfully complete the program.
9. Completion of this program does NOT qualify for academic credit at Radford University. Those wishing to obtain credit can apply to the RUC-Emergency Services program Degree Completion Track and obtain credit through the “credit by examination” process.
10. Payment for this program does not qualify as “Tuition” under IRS code. You will NOT receive a 1098-T for tax deductions from Radford University OR Western Virginia EMS Council, Inc.

**PLEASE KEEP THESE GENERAL  
COURSE POLICIES, DO NOT RETURN  
WITH THE APPLICATION!**

**TO BE READ AND SIGNED BY APPLICANT**

I have read the attached Advanced Life Support Training Programs Course Requirements and understand the requirements and meet all of those listed and applicable.

**I UNDERSTAND THAT COMPLETION OF THIS APPLICATION DOES NOT GUARANTEE ADMISSION TO THE PROGRAM.**

I understand that I must consent to criminal history check and drug screening in a manner specified by the WVEMS Council by the deadline established for the course in order to participate in clinical and field externship components of the program. Starting and completing any clinical or field rotations, and thus completion of the program, is contingent upon a NEGATIVE drug screen for specified substances. Confidentiality will be maintained at all times in accordance with WVEMS Council Student Drug Testing Policies.

Program completion is defined as completing all program requirements necessary to qualify for certification examination.

I agree to be responsible for any additional course fees if they become necessary. No refunds will be made after the second class. Practical exam cancellations, if necessary, must be made no later than the close of business 10 days prior to the practical exam.

I also understand that completion of this course ***does not*** guarantee that I will be allowed to participate in any certification processes. That decision is at the discretion of the Program Director, Program Coordinator and the Physician Course Director.

I hereby affirm that the information I have submitted on this application is true and correct and I realize that any fraudulent entry may be considered sufficient cause for rejection or subsequent revocation. I further affirm that I am eligible for certification as a Virginia EMS provider under **12 VAC 5-31-910** (criminal or enforcement history) of the Virginia EMS Rules and Regulations.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

# Course Application:

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## Section-1: APPLICANT INFORMATION *[PLEASE PRINT CLEARLY]*

_____ Last Name	_____ First Name	_____ MI	_____ VA Certification Number	_____ Expires
_____ Street Address			_____ Last 4 of Social Security Number	
_____ City/Town	_____ State	_____ Zip Code	_____ Phone (Home)	
_____ E-mail address			_____ Phone (Alternate – <i>specify type</i> )	
_____ EMS Agency Affiliation			_____ Date of Birth	

## Section-2: IN CASE OF EMERGENCY, PLEASE NOTIFY *[PLEASE PRINT CLEARLY]*

_____ Last Name	_____ First Name	_____ MI	_____ Relationship	
_____ Street Address			_____ Phone (Home)	
_____ City/Town	_____ State	_____ Zip Code	_____ Phone (Alternate – <i>specify type</i> )	

## Section-3: AFFIRMATION AND SIGNATURE

I certify that I meet all requirements of RUC - WVEMS and the Virginia Office of Emergency Medical Services, which are necessary to enroll in this course.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Essay:

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*Please answer the following questions, in your own words, by typing a response below:*

Define “integrity” and its applicability to your career.

What should the “professional” expectations of a student be in an educational program of this type?

Define “empathy” and its applicability to your patient care.

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I certify that the essay responses above are my own words and I have referenced any sources as applicable.

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Signature

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Date

