



## **PARAMEDIC EDUCATION PROGRAM APPLICATION**



**Emergency Medical Services  
Education Program**

Please return the application and supporting documentation to:

Pueblo Community College  
EMS Education Department  
900 W Orman Ave  
Pueblo CO 81004

PARAMEDIC PROGRAM APPLICATION

NAME: \_\_\_\_\_  
Last First MI

Student S# (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_  
Home Cell

e-mail address: \_\_\_\_\_ (print clearly)

Occupation: \_\_\_\_\_ Full time  Part-time

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

EMS Affiliation: \_\_\_\_\_ Address: \_\_\_\_\_

Length of Active EMS Involvement: \_\_\_\_\_

EMS Certification Number: \_\_\_\_\_ State \_\_\_\_\_

EMT or EMT Intermediate \_\_\_\_\_

Date Certificate Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Education History			
Name of School	From	To	Area of Study

Have you requested transfer of transcripts to PCC?  YES  NO

Have you completed both BIO 201 and 202?  YES  NO  
If no, what is your plan to finish?

Do you understand you will be required to pass a background check and a drug screen to be eligible for the paramedic program?  
 YES  NO

After reading the statement, place your **initials** in the box provided if you understand the statement and agree.

1. I understand the EMS Program pre-requisites and have met those pre-requisites, unless identified previously, and that my application is complete only when all the documentation required has been provided.
2. I understand that upon acceptance and enrollment, tuition and fees are due to Pueblo Community College.
3. I understand that entrance to the program does not guarantee Paramedic State certification.
4. I understand that acceptance of the application does not constitute an offer or promise of training, nor an offer or promise of employment following training, nor does it obligate Pueblo Community College.
5. I understand that all information in this application is subject to verification. If falsification of this document is demonstrated, my application shall be considered unacceptable for admission to Pueblo Community College Paramedic program
6. I have read and signed the Functional Job Statement.

APPLICANT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**PCC Paramedic Program Application Procedure**

Each applicant shall meet the following criteria to be considered for the program:

1. Complete an advising session with a PCC paramedic instructor. Call 719-549-3477 to schedule an appointment.
2. Submit an application for admission to the PCC Paramedic program. (see above.)
3. Hold a high school diploma or general education equivalent, and be at least 18 years of age.
4. Demonstrate successful performance on Accuplacer pre-screening examination in reading, English, and math at the college level. This requirement may not apply if the applicant has sufficient ACT/SAT scores or prior college education.
5. Completion of the prerequisite Anatomy and Physiology I, BIO 201. Completing both BIO 201 and BIO 202 is highly recommended. Provide an unofficial copy of transcripts for these courses.
6. Provide one letter of recommendation from an agency in which the applicant is providing care. For applicants who are not affiliated with an EMS agency a letter of recommendation from any employer can be substituted.
7. Hold and maintain a current CPR card for Professional Rescuers for the duration of the program.
8. Hold and maintain a current Colorado EMT with an IV endorsement or an EMT-Intermediate certificate for the duration of the program.
9. Read and sign a copy of the EMS Functional Job Statement (attached).
10. Demonstrate proof of appropriate immunizations as required by field/clinical sites of the PCC program.
11. Complete a PCC criminal background check (will receive information at interview)
12. Compete and pass a drug screen as required by the clinical sites. (to be done within three weeks of the start of the program, not earlier)