

**CRAFTON HILLS COLLEGE
PARAMEDIC PROGRAM
Spring 2022 Application**

To: Prospective Paramedic Student
FROM: Amanda Ward, EMT- P, BS
Paramedic Program
SUBJECT: Spring 2022 Paramedic Program (Class 98)

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 Spring 2022 paramedic program. The program will run from January 2022 until December 2022. It is divided into three distinct sessions of didactic, clinical, and field. The didactic session will meet Tuesday, Wednesday, and Thursday, January 2022 through May 2022. The clinical component will run June 2022 through September 2022. The field will be from October 2022 through December 2022.

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 Friday, August 27th, 2021. For instructions on submitting your completed packet, please email Amanda Ward (AWard@CraftonHills.edu).** The department will not accept FAX or hand delivery of the application materials. Any materials received after 4:00pm on August 27th will not be considered.

Following the accepted application, candidates will be contacted to schedule their written tests. **The written tests will be given September 20th, 21st, 22nd, 23rd, and 24th 2021.** 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 given an appointment for the oral judgment component of the entrance testing process. **The oral judgment process will be on Friday, November 5th, 2021.** There will also be two optional reviews for the oral judgment process on Tuesday, October 12th and Friday, October 15th. **The final selection of the Spring 2022 paramedic program will be Friday, November 12th, 2021.** If more candidates successfully complete the process than there are available program positions, the positions will be selected by our established selection process. Read the attached pages carefully and if you have any questions, please contact me at AWard@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 program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

For more information about the accreditation process, please contact:

Committee on Accreditation of Allied
Health Education Programs (CAAHEP)
25400 US Highway North 19, Suite 158
Clearwater, FL 33763
727-210-2350 or www.caahep.org

Committee on Accreditation of
Educational Programs for the Emergency
Medical Services Professions (CoAEMSP)
8301 Lakeview Parkway, Suite 111-312
Rowlett, TX 75088
214-703-8445 or 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.
4. 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 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.
7. If you have any questions regarding medical testing / records, please contact Amanda Ward via email or at (909) 389-3255.

***Vaccination Requirements**

MMR – Measles, Mumps, Rubella

- Must show proof of (2) MMR immunizations **or** Positive titers for all three (MMR) (Quantitative titer)

Varicella Series (VZV)

- Must show proof of (2) immunizations **or** Positive 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** Positive titer (Quantitative titer)

***Requirements are subject to change based on clinical sites.**



Your Future is on the Rise

**PARAMEDIC PROGRAM
PRE-ENTRANCE MEDICAL CLEARANCE FORM**

APPLICANT: _____
Last First Middle

Reason for Referral:

This evaluation is required for entrance and participation in the Crafton Hills College Paramedic Program. The Paramedic Program requires that students be able to complete the required physical activities, which are listed below with no restrictions:

- | | |
|-----------------------|-----------------------------|
| Good physical stamina | Endurance |
| Strength | Standing |
| Walking | Sitting |
| Lifting | Carrying |
| Pushing | Pulling |
| Climbing | Balancing |
| Stooping | Kneeling |
| Crouching | Crawling |
| Reaching | Rotational Movement |
| Repetitive Movement | 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 the 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

My signature below indicates the above named individual is free to participate in the Paramedic Program without restrictions. **(Form must be stamped by physician's office)**

Physician Signature _____ Phone _____

Physician Name _____ Date _____

Agency _____

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.
3. An oral judgment 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 completed your experience prior to submitting your application.**
5. You **must** get Quantitative titer results or vaccinations **before** 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. Call and ask 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: Amanda Ward
Paramedic Education

Important: Any applications not received in THIS office by the deadline will not be considered.

PLEASE PRINT THE FOLLOWING INFORMATION:

NAME: _____

ADDRESS: _____

CITY: _____ **ZIP CODE:** _____

PHONE: _____

STUDENT ID NUMBER: _____ **DOB:** _____

EMAIL: _____

The following list of requirements constitutes a complete application. Your application must include the following documents in the sequence specified:

- Completed cover sheet
- Copy of your EMT-Basic Card (state)
- Copy of BLS Healthcare Provider Card from American Heart Association
- Resume
- Original letter of experience (on original agency letterhead, signed by an Operations Supervisor/Manager, Training Officer, Fire Captain or Fire Chief)
- Copy of your high school diploma or GED
- Copy of your proof of **(3)** vaccinations against Hepatitis B or Positive TITER results
- Copy of your proof of **(2)** vaccinations against MMR (Measles, Mumps, Rubella) (2 shots) or Positive TITER results
- Copy of your proof of **(2)** vaccinations against Varicella (VZV) or Positive TITER results
- Copy of your vaccination of TDap (given within the last 10 years)
- Completed Pre-Entrance Medical Clearance Form stamped by Physicians office
- Official, Sealed Transcripts of your transferable Anatomy & Physiology courses (Unofficial acceptable until completion of course if currently enrolled)

For Office Use Only

Date of submission: _____

Class #: _____

Received by (initials): _____