



# Emergency Medical Technician

## Application Packet

Print the application, or save the application onto your computer, open and fill in the information. When the form is complete, email to [EMSProgram@coloradomesa.edu](mailto:EMSProgram@coloradomesa.edu) or turn in to the EMT Office, Student Wellness Center, Room 204.

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Last, First, MI (please print legibly)

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Date

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Semester Desired

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Student ID Number

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Choose day or evening classes

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CMU/WCCC Student ID (700#)

Western Colorado Community College  
2508 Blichmann Avenue  
Grand Junction, CO 81505

**Emergency Medical Technician Application Checklist**  
(Retain this Sheet)

**ADMISSION TO COLLEGE**

- \_\_\_ 1. Complete Western Colorado Community College (WCCC) Application for Admission at:  
<http://www.coloradomesa.edu/wccc/apply.html>  
(Current Colorado Mesa University (CMU) or WCCC students please disregard.)
- \_\_\_ 2. Submit official copy of High School Transcripts or G.E.D. scores, and/or College Transcripts from previous colleges attended to: [admissionsprocessing@coloradomesa.edu](mailto:admissionsprocessing@coloradomesa.edu)
- \_\_\_ 3. Upon completion of your application and submission of your official transcripts, you will then receive a letter of acceptance into CMU/WCCC along with your student ID number (also known as a 700#).

**PRE-ADMITTANCE REQUIREMENTS**

- \_\_\_ 1. Background Check  
You can use either of these sites to obtain a background check.
  - a. [www.castlebranch.com](http://www.castlebranch.com) please use the code CM75. *You do not need to provide any paperwork for the background check, as we have access via the online website for CertifiedBackground.com.*  
**Fee is \$61.20**
  - b. **Colorado Bureau of Investigations- for Colorado residents:**  
<https://www.cbirecordscheck.com> Go to the website and select Internet Background Check. Then fill in all the information and get your document.  
**YOU MUST PRINT THIS OUT AND BRING IT IN TO THE EMS OFFICE!**  
**Fee is \$5.00**
- \_\_\_ 2. Schedule an interview with the EMS Director, [pholder@coloradomesa.edu](mailto:pholder@coloradomesa.edu)

**ADMISSION TO EMT PROGRAM**

- \_\_\_ 1. Fill out the EMT application and send it to [EMSProgram@coloradomesa.edu](mailto:EMSProgram@coloradomesa.edu) or take it to Student Wellness Center on CMU campus, EMS Office, Room 204.
- \_\_\_ 2. Submit a colored, enlarged copy of current, valid ID or driver's license.
- \_\_\_ 3. Five (5) Panel drug screen. **Lab of your choice. Must be within 45 days of the first day of class.**
- \_\_\_ 4. Physical examination.  
Must be able to lift 50lbs. Examination must not be more than three (3) months old.
- \_\_\_ 5. Proof of the following immunizations:
  - Two Measles/Mumps/Rubella
  - Varicella
  - Tetanus (Current within 10 years)
  - Hepatitis B (Series of three (3) immunizations)
  - Influenza (yearly)
  - Current TB skin test. (Either a two-step TST within the past 12 months or proof of negative TST documented yearly for 2 years. If the student has proof of a one-step TST within the past 12 months, a one-step TST should be done.)
- \_\_\_ 6. Submit proof of professional liability insurance. Students may apply for insurance through The National Professional Groups as a student. The website is [www.hpsso.com](http://www.hpsso.com). Should students choose to go through a different company; the policy must be comprehensive general Liability insurance covering bodily injury and property damage liability with minimum coverage limits of \$1,000,000 per occurrence/\$2,000,000 general total limit, and medical professional liability insurance with minimum coverage limits of \$1,000,000 per claim/\$3,000,000 annual aggregate. Emergency Medical Technician student must be listed.
- \_\_\_ 7. Submit proof of personal health insurance





### Additional Questions

Is there anything in your background or experience that may negatively reflect on your application or ability to complete the program? Please explain.

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### Disclaimer and Signature

*I certify that the previous answers are true and complete.*

***If this application leads to acceptance, I understand that false or misleading information in my application or interview may result in my dismissal from the EMS program.***

Signature: \_\_\_\_\_

Date: \_\_\_\_\_