



FOOTHILL COLLEGE PARAMEDIC PROGRAM APPLICATION

NAME: _____
Last First Middle

Foothill Student CWID Number (required): _____

If you don't have a FH ID number, you will need to register at: <http://www.foothill.edu/admissions.php>
There is no cost involved to register for the college.

Please list any other name(s) by which you have been known:

Address City State Zip

Home Phone Cell Phone

Valid Email Address: _____

Have you previously applied to the Foothill College Paramedic Program? Yes No

Indicate year(s) of previous applications: _____

Have you previously attended any other Paramedic Programs? Yes No

If yes, list the school and the reason you left the program: School Name: _____

Reason: _____

EMERGENCY CONTACT

NAME: _____
Last First Phone #

PRIOR EDUCATION

High School from which you graduated: _____ Year: _____
(If you received your HS Diploma/degree outside of the United States, please indicate the City and Country where you've received it)

Please list the name, starting and ending dates, and any degrees or certificates, for all colleges, universities, technical and vocational schools attended. You must include colleges in which courses were attempted although they may not have been completed: **Do not leave this area blank if you attended any post-secondary education institutions.**

	Name of School	City and State	Dates Attended	Degree/s Received
1				
2				
3				
4				
5				
6				

FOOTHILL COLLEGE PARAMEDIC PROGRAM ADMISSION WORKSHEET

Directions: You can use this worksheet to see if you have you met the prerequisites for application to the program. We recommend you set up an appointment with our counseling department. To make an appointment, please go to <http://www.foothill.edu/counseling>

PREREQUISITE COURSES (Must be completed with a “C” grade or better before the time the program begins)

	Equivalent Course #	School (High School or College)	Sem/Qtr	Year (YY)	Units	Grade
High School Graduation/GED Or Equivalency						
English 110 eligibility (or higher), ESLL 25, or English Placement Test						
Math 220 Algebra (or higher), High School Algebra, or Math Placement Test						
Human Anatomy/ Physiology with labs 3 quarters or 2 semesters						
Human Anatomy/ Physiology with labs 3 quarters or 2 semesters						
Human Anatomy/ Physiology with labs 3 quarters or 2 semesters						
Expiration of EMT Card						
Expiration of BLS Card						
480 hours of EMS-level work experience (three months full-time work or equivalent)						
List Cumulative College GPA						

Have you completed the above prerequisites? Yes ____ No ____ (You must complete them before applying.)

Are you interested in receiving ONLY the Paramedic Certificate? Yes ____ No ____ (We encourage that you seek a Paramedic Associate's degree)

(If no, you must meet the General Education requirements listed below, prior to graduation, to be eligible to receive a Paramedic Associate's Degree.)

GENERAL EDUCATION REQUIREMENTS

All General Education courses must be completed to earn the Paramedic Associate of Science degree. General Education courses are not required to sit for the required licensure in California. Due to the rigorous course load during the Paramedic Program, it is **strongly recommended** that all applicants seeking the AS degree, complete their General Education courses prior to beginning the program.

There are 4 ways to satisfy the General Education Requirements, **choose one only**:

1. ____ AA or AS from a California community college (GE waived). **(Move on to the next page.)**
2. ____ BA or BS Degree from an accredited U.S. College or University (GE waived). **(Move on to the next page.)**
3. ____ You do not have a college degree as listed above, but you have completed all GE courses (attach CA Community College General Education completion certification from the college where you completed the coursework).
(Move on to the next page.)
4. ____ You have not completed a college degree, but you have completed the following GE courses:

If you indicated number 4 above, you must fill in the table below with the GE coursework you have completed to date or is in progress. Please provide complete information in each category. See Foothill College Catalog & Paramedic Program Curriculum Sheet for help.

If you indicated numbers 1, 2, or 3 above, leave this area blank and continue on to the next page.

General Education Associate Degree & Other Required Courses:	Course #	College	Sem/Qtr	Year (YY)	Units	Grade
Area I: Humanities (Arts & Letters)						
Area II: English ENG 1A or ESLL 26						
Area III: Natural Sciences w/Lab (CHEM 30A/25 or BIOL 41)						
Area IV: Social & Behavioral Sciences (PSYC 1 recommended)						
Area V: Comm. & Analytical Thinking (COMM 1A recommended)						
Area VI: U.S. Culture & Communities						
Area VII: Lifelong Understanding Course #1 (2 courses)						
Area VII: Lifelong Understanding Course #2						



TECHNICAL STANDARDS FOR THE FOOTHILL COLLEGE PARAMEDIC PROGRAM

The following statements identify the technical standards needed for the paramedic and for students enrolled in the Foothill College Paramedic Program.

The Paramedic/ student must possess sufficient strength, motor coordination and manual dexterity. Please answer the following questions.

Are you able to lift at least 125 pounds unassisted?	Yes	No
Are you able to stand, carry, balance, and walk on uneven terrain?	Yes	No
Are you able to stoop, kneel, climb, crouch, and crawl as needed to reach patients and safely remove/transport them?	Yes	No
Are you able to carry and utilize emergency medical equipment appropriately?	Yes	No
Are you able to communicate verbally to patients, physicians, nurses and co-workers?	Yes	No
Are you able to hear, understand and react quickly to verbal instructions and patient needs?	Yes	No
Are you capable of handling stressful situations related to technical and procedural standards and patient care situations?	Yes	No
Are you capable of providing physical and emotional support to the patient in the out-of-hospital setting and be able to set priorities for basic and advanced emergency care?	Yes	No
Are you capable of following directions effectively and working closely with members of the health care community?	Yes	No

If you cannot perform one or more of the technical standards identified above, you will have difficulty performing the jobs required of a paramedic. **Please explain any difficulties you might have.**

PERSONAL STATEMENT - please take a moment to tell us about yourself, why you're are applying to our program, and what your future plans are in the EMS profession.

BACKGROUND SCREENING, POLICY AND PROCEDURE

To comply with JCAHO, state and local regulations regarding background checks for healthcare providers, the Foothill College DMS, RSPT, RTT, PHT and RT program students will be required to undergo a background investigation. DMS, RSPT, RTT, PHT and RT program students must have clear criminal background checks to participate in placements in clinical facilities. The background check is not a requirement for admission to a program and will be completed after an invitation for admission is received. Background screening is required for registration in the clinical courses*.

Background investigations must minimally include the following:

- Social Security Verification
- Criminal Search (seven years or up to five criminal searches)
- Employment Verification (last two employers)
- Violent Sexual Offender and Predator Registry Search
- HHS/OIG List of Excluded Individuals/Entities (<http://exclusions.oig.hhs.gov/search.html>)
- GSA List of Parties Excluded from Federal Programs (<http://epls.arnet.gov/>).
- Seven years history
- Address verification
- Two names (current legal and one other name)
- Three counties

These requirements may be expanded due to additional requirements, which may come from hospital/clinical facilities at any time.

Students may not be able to attend clinical facilities for felonies and some misdemeanors.

In addition, students may be denied access to clinical facilities based on offenses appearing on the criminal record, which may have occurred more than seven years ago.

Students must provide clinical facilities with information allowing the clinical facility (and school as necessary) access to the background check. If the students record is not clear, the student will be responsible for obtaining documents and having the record corrected to clear it. If this is not possible, the student will be unable to attend the clinical portion of the program. If a student cannot complete the clinical training during the time it appears in the curriculum, a student may not be allowed to complete the program requirements.

If after reviewing the background screening, a clinical site determines that a student does not meet security standards, the student will be ineligible for mandatory clinical rotations and either be denied admission to clinical portion of the program. The school is not obligated to make special accommodations and will not find an alternative clinical site if there is a problem with a student's background screening. It is the responsibility of the student to provide/bring the background screening to the clinical site.

PARAMEDIC PROGRAM APPLICATION CHECKLIST

✓	Please make a ✓ or attach the documents in the available box/es to insure you have completed everything in your application. Note: the documents you upload must be PDF files.
	I fully read the Paramedic Program Online Application Instructions before applying. (Required)
	I accurately filled the Paramedic Program Online Application. (Required)
	I am able to comply with the technical standards and I understand that failure to perform any of these standards may be cause for action by the program in accordance with the policies and procedures of the Paramedic Program Student Handbook, including dismissal. (Required)
	I have read and understand the Foothill College Background Screening, Policy and Procedure. I understand that Foothill College is not responsible for either the accuracy of screening results or any agencies’ determination, if any, as to whether I will be permitted to participate in clinical rotations. I also understand the Foothill College policy and procedure may be, at any time, expanded due to clinical facilities developing new requirements. I recognize that background screening results can impact my receiving a clinical site, completing program requirements or gaining a license to practice upon graduation. (Required)
	If accepted into this program, I will abide by all the program policies and procedures. I certify that the statements and information in this application are true and complete to the best of my knowledge. (Required)
	I've sent my EMT Work Experience Form to my employee. (Required)
	I've ordered official electronic transcripts from all colleges and universities attended. The transcripts should be sent directly to Foothill College Admissions and Records. (Required) Note: You don't have to order Foothill and De Anza college transcripts. If your college does not offer official electronic transcripts, please order official transcripts and have them mailed directly to Foothill College Admissions and Records.
	Attach copies of the following required documents that will be considered with your application: EMT card, BLS/CPR card, driver's license, proof of High School graduation (diploma, transcripts, GED Certificate). (Required) Other: Attach any additional information you would like to provide us, such as: letters of recommendation, additional certifications earned, placement test results, course petitions, reciprocity agreements, CSU/IGETC, or local non-transfer GE pattern completion, or any other documentation you'd like to include. (Optional)

Please review your application thoroughly, before signing it.

Signing the application will submit your _____ application.

To submit your application, please sign it. No changes will be allowed after you have signed the application. Applicants may submit one application per cohort. Please make sure to review your application thoroughly, for accuracy. This is very important.

You will be emailed a copy of the application, for your records. Please review the email you have provided.

My signature verifies the accuracy of my application:

Signature

Printed Name

Date