

PARAMEDIC APPLICATION

We are now accepting applications for the next Paramedic course. We offer classes at our FCTC Public Safety Academy located at 3640 Gaines Road, St. Augustine.

In order to be eligible for this class, you must meet the following prerequisites and complete the steps listed in the enrollment process.

Prerequisites

1. High school diploma, GED or higher degree.
2. Must be 18 years of age.
3. Current Florida EMT certification. A student that has successfully graduated EMT and is awaiting the state/national exam may be admitted to the paramedic course with a scheduled test date for the EMT state/national exam.
4. Current CPR Certification, BLS for Health Care Provider.
5. Submit the signed Health Certificate with physical exam results and immunization records, including Hepatitis B vaccination, MMR, TB (tetanus booster) and current influenza vaccination. The tuberculin skin test must be current within one year of the program start date.
6. Submit negative drug screen WITHIN 6 MONTHS PRIOR TO CLASS START DATE and be AT LEAST an 8 panel or higher by a physician of your choice. **Results must be faxed to (904) 823-2259 or emailed directly to us by the lab or physician.**
7. FDLE background check within one year. Using a credit card, go online to the Florida Department of Law Enforcement at: <https://cchinet.fdle.state.fl.us> . Attach the results to your application. Be sure to print the **RESULTS** – not the receipt.

CONVICTED AND/OR REGISTERED SEXUAL OFFENDERS OR ANYONE WITH A FELONY DRUG CONVICTION WILL NOT BE ADMITTED TO THIS PROGRAM. It is recommended, if you have a misdemeanor or felony on your record, to contact the Florida Department of Health to ensure that acquiring a state or national EMT license will not be affected. www.floridahealth.gov/licensing-and-regulation/emt-paramedic/index.html Customer Contact: (850) 488-0595

If you meet the listed requirements, please continue with the Application Checklist.

APPLICATION CHECKLIST

Step One: To register as an FCTC student, complete the following tasks:

1. Go to your program on **FCTC.edu** and click on **Create My FCTC Account** to start your pre-registration.
2. Apply for **Federal Student Aid** Go to www.fafsa.ed.gov FCTC School Code is 012544.
3. Submit payment for application and testing fees to Registration Department, 2980 Collins Ave. (904) 547-3282.
4. Take the [Test of Adult Basic Education \(TABE Test\), Wonderlic](#) or apply for **Basic Skills Exemption**.
5. Provide official sealed [Transcripts](#).
6. Complete your [Florida Residency Affidavit](#).
7. **Complete the Application and attach a copy of all required documents.**
8. Submit payment for application and testing fees to the Main Campus Registration Department.

Step Two: To register for the Paramedic Program, complete the Application and include a copy of the following documents:

- Paramedic Application
- High School Diploma, GED or Higher Degree
- Valid TABE Scores, Wonderlic or Basic Skills Exemption
- Valid Driver's License
- Current Florida EMT Certification: A student that has successfully graduated EMT and is waiting the state/national exam may be admitted with EMT state/national exam schedule test date
- Current CPR Card BLS for Health Care Provider
- Signed Health Certificate/Physical Exam (attached)
- Immunization Record
- Negative Drug Screen
- Background Check <https://web.fdle.state.fl.us/search/app/default>
- Copy of the Payment Receipt for application from the Main Campus Registration Department

ENROLLMENT PROCESS

Course Description

The FCTC Paramedic course is a certification program that meets all state and national requirements to become a state and nationally certified paramedic. Upon successful completion of the FCTC paramedic program you will be eligible to take the state and/or national registry test to become a licensed paramedic.

Acceptance into the Program

Once you have completed the application process by providing all required documents, you will be invited to attend orientation. Students will be accepted into the program on a first come, first served bases. Once the roster has been filled, students will be offered a seat in the next available class.

Orientation

Attendance at the Orientation is mandatory in order for you to be considered for the program and will be held approximately two to four weeks before classes begin. You must attend orientation before you will be allowed to register for the course. If you are unable to attend orientation, your application will be re-evaluated with the next pool of applicants. After your second opportunity, your application will be deactivated, and you will have to reapply. Attendance requirements, dress code requirements, and grade requirements will be reviewed at orientation.

Auxiliary Aid

FCTC provides auxiliary aids and services for persons with disabilities. If you need assistance during the course of study, please contact your Student Advisor in Building A or fctcstudentservices@stjohns.k12.fl.us.

Program Fees Program Fees

Refer to FCTC.edu, go to the program of your choice and click on Program Costs for a complete fee schedule.

Course Length

Paramedic Day Shift Total: 1100 Hours / 48 Weeks

Assessment

Contact Registration to pay your test fee which includes assessment or exemption. Then contact [Test Center](#) to schedule at fctctesting@stjohns.k12.fl.us or (904) 547-3390. TABE Requirements are new as of July 1, 2018. For additional information, visit [Test Center](#).

TABE required scores

Reading	Math	Language
597	627	608

Wonderlic required scores

Verbal	Quantitative
10	10

Paramedic Program Accreditation

FCTC paramedic is a fully accredited program. The Emergency Medical Technician – Paramedic Education Program at First Coast Technical College has a Certificate of Approval from the Florida Department of Health, Bureau of Emergency Medical Services. The Paramedic Program at First Coast Technical College is also accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions.

Commission on Accreditation of Allied Health Education Programs

1361 Park Street Clearwater, FL 33756 727-210-2350 www.caahep.org



Prospective Paramedic students should be aware that graduating from any Florida certified training center will allow them to take the Florida Paramedic certification examination. However, for students entering a Paramedic program after January 1, 2013, only those students who graduate from a CAAHEP accredited program (or one that holds a CoAEMSP “Letter of Review”) will be eligible to take the National Registry (NREMT) paramedic certification exam.

Since many states now require NREMT Paramedic certification as a requirement for state certification, graduating from a non-accredited program may limit your ability to become certified in other states. See the following link for more information.

http://www.nremt.org/nremt/about/para_accred_implementation_policy.asp

Are you declaring a disability/handicap? Yes No

If yes, specify:

The following information is not used in the eligibility process.

Applicant Gender Female Male

Race White, Not Hispanic Black, Not Hispanic Asian/Pacific Islander Hispanic
 American Indian/Alaskan Native Multi-Racial Other _____

Are you a United States citizen? Yes No

Is English your second language? Yes No

I have been provided the consumer information notice at <http://fctc.edu/consumer/gainful-employment/> and campus security report on the FCTC website at <http://fctc.edu/about/safety/>. FCTC will also provide a paper copy of the campus security report upon student request.

The FCTC Student Handbook is located at <http://fctc.edu/students/handbook/>. I have read the FCTC student handbook and I agree to accept responsibility and will comply with all policies outlined in the FCTC student handbook.

I verify that all information contained in this application is true and correct. I authorize First Coast Technical College to contact former employers and educational institutions listed in this application, and further authorize these employers and educational institutions to release information to officials of First Coast Technical College concerning my performance and progress while under their employ or enrolled in their program(s).

Applicant Print Name

Applicant Signature

Date

HEALTH CERTIFICATE

Name: _____ SS#: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Cell Phone: _____ Work Phone: _____

Immunization Status: ATTACH COPIES OF ALL IMMUNIZATION RECORDS. On the next page is an explanation of the required documentation for the program. You must provide a copy of these immunizations before you will be admitted into the program.

To the best of my knowledge, I am emotionally and physically capable of fully participating in the EMT program.

Applicant Print Name

Applicant Signature

Date

THE FOLLOWING IS TO BE COMPLETED BY A LICENSED PHYSICIAN

This is to certify that the above Applicant is free from contagious diseases and is physically and emotionally capable of pursuing studies leading to certification as an emergency medical technician.

Physician's printed name

Date

Physician's signature

Physician's Address: _____

City: _____ State: _____ Zip: _____

IMMUNIZATION CRITERIA

MMR: Documented proof of immunity to measles and rubella is mandated by the State of Florida. Immunity is defined as follows:

- If born before 1957, you are exempt from the law.
- Documentation of receipt of two (2) doses of live measles vaccine after first birthday and no less than one month apart (inactivated measles vaccine were not available in U.S. from 1963-67 so this is not acceptable).
- Physician-diagnosed measles and rubella with physician-certified data including month and year of diseases.
- Report of immune titer (blood test), which verifies immunity.

Rubella: (German measles): Report of immune titer (blood test) providing immunity (certificate to include month, day and year) or born before 1957.

Mumps: Immunization is included in the MMR vaccine and is recommended.

Varicella: (Chicken Pox): By positive history of chickenpox or Varicella vaccination.

DPT, DT, TD or tetanus toxoid: tetanus immunization must be current. If you have not had a booster within the last 10 years, you must get another one. It may be either tetanus toxoid or diphtheria/tetanus (DT, TD, DTap).

Influenza: Proof of current influenza/flu vaccination. Must be current during the flu season (October thru March).

TB test (PPD): must have been tested within one year. It must stay current through the end of the program. If test reads, or has ever read positive, proof of a negative chest x-ray must be provided.

Completing this form is not required if you already have similar documentation.

TB (Tuberculin Skin Test/PPD)

Name:_SSN:_____ This is to certify that Applicant was given a tuberculin skin test.

Date given:_____LFA:_____RFA:_____

Given by:_____Signature:_____

Print Name

Skin Test must be read 48-72 hours after test

Date read:_____Results:_____mm

Read by:_____Signature:_____

Print Name

Hepatitis B Vaccine (HBV)

Hepatitis B is a serious infection of the liver caused by the Hepatitis B virus. It can be contracted through exposure to blood or other body fluids. Immunity to HBV may be gained from vaccination against the virus. As it takes a considerable amount of time to develop the necessary antibodies to the disease, the vaccine is given in a series of three injections (initial, 1 month and 6 months). FCTC requires that the EMT or Paramedic student begin the series as soon as possible prior to the beginning of the program and that the series be continued as directed. This series is a requirement rather than a suggestion because hospitals and EMS services utilized for clinical rotations and field experience will no longer allow students to work at their facilities without having the HBV series.

If you have had the series previously, it is recommended that you have a Hepatitis B titer performed to ensure you have immunity to the disease. The vaccine and titer testing can be obtained through many private health care providers.

It is a **REQUIREMENT** that any student enrolled in the EMT or Paramedic program must obtain the HBV series, provide documentation of having had the series previously or provide proof from a licensed medical laboratory that the student’s Hepatitis B titer shows immunity to the disease.

NOTE: *Students may START the program if they have had only the FIRST vaccination. However, they must receive the 2nd and 3rd vaccinations as scheduled to REMAIN in the program.*

Completing this form is not required if you already have similar documentation.

Applicant Name			SSN	
Hepatitis B Record				
Inj.#	Date	Amount	Injection Site	Administered By
1.				
2.				
3.				