



**Respond Right EMS Academy / St. Charles  
Community College Consortium**

**Paramedic Program  
2019**



## 2019 Paramedic Program

### Information & Application

**Thank you** for your interest in becoming a Paramedic. Our program is proud to deliver academic excellence while creating compassionate healthcare professionals. Our academy is privately owned and open to all students. You do not need to be affiliated with or sponsored by a department to apply for our program.

Our program requires candidates to have a computer and access to high speed internet for course work and communication, have reliable transportation for travel to/from class and clinicals, maintain a high degree of professionalism both in and out of the classroom, maintain a high level of hygiene and grooming, and be able to read and comprehend at a college level. This is a very demanding program that will require a lot of dedication and hard work.

Attached you will find a packet of information that includes items such as a job outlook, job requirements, program overview, entrance exam information, an application, and other important documents. You will find detailed information in this packet that you must read carefully and pay close attention to detail when completing all the required steps. We will be evaluating your abilities to read and follow directions throughout the entire process.

If you have not had the opportunity to meet with an advisor, make an appointment to find out what a career as a paramedic is like and how we can assist you with any questions or paperwork.

#### Programmatic Accreditation

The Respond Right EMS Academy / St. Charles Community College Consortium Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

For more information about these accrediting agencies:

Commission on Accreditation of Allied Health Education Programs  
25400 US Highway 19 North  
Ste 158  
Clearwater, FL 33763  
727-210-2350  
[www.caahep.org](http://www.caahep.org)

CoAEMSP  
8301 Lakeview Parkway Suite 111-312  
Rowlett, TX 75088  
214-703-8445  
FAX 214-703-8992  
[www.coaemsp.org](http://www.coaemsp.org)



## 2019 Paramedic Program

Respond Right EMS Academy has received Training Entity Accreditation through the Missouri Department of Health and Senior Services Bureau of Emergency Medical Services.

St. Charles Community College is accredited by The Higher Learning Commission of the North Central Association of Colleges and Schools, telephone: 800-621-7440; fax: 312-263-7462; website: [www.ncacihe.org](http://www.ncacihe.org).

The North Central accreditation, along with transfer agreements with four-year colleges and universities, assures the value of credits earned at SCC.

Courses taken for credit at SCC will be accepted in transfer by other colleges, provided they are appropriate to the degree sought.

During the Paramedic program, student will complete approximately 1300 hours of didactic, lab and clinical hours. Students will receive a Certificate of Completion through Respond Right EMS Academy upon completion of the Paramedic program. Upon successful completion of the program, students will become certified in Advanced Cardiac Life Support, Pediatric Advanced Life Support and Pre-Hospital Trauma Life Support. Students will be eligible to sit for NREMT Paramedic psychomotor and written exam upon completion of the program.

Our goal is to prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels.

We encourage you to ask any questions you may have during your journey to becoming a Paramedic. We are devoted to helping you achieve your goals. Please feel free to let us know how we can help you!

Sincerely,

Toni Milan, BS, Paramedic  
Program Director  
Paramedic Program

Donna Weiss, AAS, Paramedic/Firefighter  
CEO / Program Director  
EMT Program



# 2019 Paramedic Program

## **Paramedic Job Requirements**

The Paramedic's scope of practice includes basic and advanced skills focused on the acute management and transportation of the broad range of patients who access the emergency medical system. This may occur at an emergency scene until transportation resources arrive, from an emergency scene to a health care facility, between health care facilities, or in other health care settings.

In some communities, Paramedics provide a large portion of the out-of-hospital care and represent the highest level of out-of-hospital care. In communities that use emergency medical dispatch systems, Paramedics may be part of a tiered response system. In all cases, Paramedics work alongside other EMS and health care professionals as an integral part of the emergency care team. The Paramedic must be able to deal with adverse and often dangerous situations which include responding to calls in districts known to have high crime and mortality rates. Self-confidence is critical, as is a desire to work with people, solid emotional stability, a tolerance for high stress, and the ability to meet the physical, intellectual, and cognitive requirements demanded by this position.

The Paramedic's scope of practice includes invasive and pharmacological interventions to reduce the morbidity and mortality associated with acute out-of-hospital medical and traumatic emergencies. Emergency care is based on an advanced assessment and the formulation of a field impression. The Paramedic provides care designed to minimize secondary injury and provide comfort to the patient and family while transporting the patient to an appropriate health care facility.

The Paramedic has knowledge, skills, and abilities developed by appropriate formal education and training. The Paramedic has the knowledge associated with, and is expected to be competent in, all of the skills of the EMR, EMT, and AEMT. The major difference between the Paramedic and the Advanced Emergency Medical Technician is the ability to perform a broader range of advanced skills. These skills carry a greater risk for the patient if improperly or inappropriately performed, are more difficult to attain and maintain competency in, and require significant background knowledge in basic and applied sciences.

The Paramedic is the minimum licensure level for patients requiring the full range of advanced out-of-hospital care. The scope of practice is limited to advanced skills that are effective and can be performed safely in an out-of-hospital setting with medical oversight. The Paramedic transports all emergency patients to an appropriate medical facility. The Paramedic serves as part of an EMS response system, ensuring a progressive increase in the level of assessment and care. The Paramedic may make destination decisions in collaboration with medical oversight. The principal disposition of the patient encounter will result in the direct delivery of the patient to an acute care facility.

## **Physical Demands**

Aptitudes required for work of this nature are good physical stamina, endurance, and body condition that would not be adversely affected by frequently having to walk, stand, lift, carry, and balance at times, in excess of 125 pounds. Motor coordination is necessary because over uneven terrain, the patient's, the Paramedic's, and other workers' well-being must not be jeopardized. Different situations will require that the Paramedic be able to perform in the following manner: stand, walk, sit, lift, carry, push, pull, climb, stoop, kneel, crouch, crawl, reach, feel, talk, hear and see.



## 2019 Paramedic Program

### **Job Outlook\***

Employment of emergency medical technicians (EMTs) and paramedics is projected to grow 24 percent from 2014 to 2024, much faster than the average for all occupations. Emergencies, such as car crashes, natural disasters, and acts of violence, will continue to create demand for EMTs and paramedics. Demand for part-time, volunteer EMTs and paramedics in rural areas and smaller metropolitan areas will also continue.

Growth in the middle-aged and elderly population will lead to an increase in age-related health emergencies, such as heart attacks and strokes. This increase, in turn, will create greater demand for EMT and paramedic services. An increase in the number of specialized medical facilities will require more EMTs and paramedics to transfer patients with specific conditions to these facilities for treatment.

\*Cited from Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, 2016-17 Edition, EMTs and Paramedics, on the Internet at <https://www.bls.gov/ooh/healthcare/emts-and-paramedics.htm>



## Program Fees – Certificate of Completion

### Paramedic Program

<b>Total Cost</b> .....	<b>\$ 10,325.00</b>
Includes Course Fees and Tuition	
Due at time of acceptance .....	\$5,162.50
Due at least 10 days before the start of class .....	\$5,162.50

\*Note - \$400 of your total cost is non-refundable and non-transferable.

**Registration Fee** ..... **\$ 150.00**

#### Program Fees/Cost Include:

Entrance exam, Tuition, Technology & Lab, Professional Liability Insurance while enrolled, Clinical & Field Internship, Polo Shirt, Parking Sticker

\*Textbook bundle is not included

\*\*Prices subject to change without notice

#### Additional Fees:

Estimated cost of additional supplies - \$1100.00\*

This could include the cost of a laptop, uniform pants/polo, boots, textbook bundle, software, etc.

### Payment Plans Available

<b>Total Cost (\$200 charged for financing)</b> .....	<b>\$ 10,525.00</b>
Includes Course Fees and Tuition	
Due at time of acceptance .....	\$5,300
Amount financed .....	\$5,225

\*Note - \$400 of your total cost is non-refundable and non-transferable.

**Due with registration** (non-refundable/non-transferable) ..... **\$ 150.00**



# 2019 Paramedic Program

## **Program Overview**

The day paramedic program includes a total of 1,380+ hours of time that is divided into three phases.

**Phase 1** - didactic phase - includes all lecture and lab skills training. The didactic phase lasts approximately 11 months. During this phase class will meet one or two days per week. Specialty class sessions may be held on the weekend or in the evening. Cognitive and psychomotor learning occurs during this phase with the use of lectures, presentations, case studies and lab skill training. Students are required to read all lecture material and complete homework before the day of class. The goal of this phase is to prepare the student with critical thinking abilities to apply their knowledge to real life patients. Students must pass Phase 1 to progress to Phase 2.

**Phase 2** – clinical / field phase – includes all hospital and ambulance clinical rotations. Phase 2 overlaps / co-enrolls with Phase 1 and lasts approximately 8 months. The student will have the ability to perform skills in clinical areas such as the emergency department, ICU, burn unit, operating room, ambulance etc. Students will have the opportunity to perform skills with designated preceptors under the supervision of affiliated hospital staff such as paramedics, nurses and physicians. Students must pass Phase 2 to progress to Phase 3.

**Phase 3** – internship phase – includes performing a full scope of practice on an Advanced Life Support unit while under the direct supervision Paramedic preceptors. Phase 3 will last approximately 1-2 months. During this phase students will demonstrate entry level competency as a Paramedic. Students will demonstrate that they are able to develop and practice high-level decision making by integrating and applying their learning while dealing with real patient encounters. This capstone experience will occur on an ALS unit which will require the student to perform competently as a Paramedic.

Students will be required to pass an online CBT test during Phase 3 to be course completed.

Students who fail out of any portion of the class will be required to follow the Advanced Placement Policy. It is important that a student gains an understanding and comprehends the material before they are allowed to move forward to the next Phase.

It is our goal to prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels.

\*Information is subject to change. This is not a course syllabus. Please consult with Administration for the most current information.



## **Admission Policies**

The EMS courses at Respond Right EMS Academy have additional admission requirements due to the physical demands and nature of the job requirements. Every student is encouraged to apply; however, they are encouraged to review the job requirements and physical demands before applying. Not all applicants will be accepted into the program based on meeting the admission requirements.

The additional admission requirements include:

- Entrance exam
- Prerequisite courses
- Criminal background checks
- Physical exams and release from physician
- Minimum age
- U.S. Citizen
- Drug test

Respond Right EMS Academy offers equal access and opportunities in employment, admissions and educational services. RREMSA will not discriminate based on race, color, ethnicity, religion, gender, pregnancy, age, marital status, national origin, genetic information, sexual orientation or disability status in its employment practices or in the admission and treatment of students. Complete policies on Americans with Disabilities, discrimination and harassment can be found in the Program Manual. If you have a question or concern, please contact Donna Weiss at 636-387-6200. These admission requirements may change, and students are encouraged to consult with administration when they apply to confirm the current requirements.

### **Transfer of Credits**

Transfer students are those who wish to transfer to Respond Right EMS Academy from another CoAEMSP Accredited Institution. Students applying should be in good standing without academic or behavior related issues. Credit for EMS courses will only be granted if attended at a CoAEMSP accredited institution.

Transfer students will be required to attend orientation as directed and any other required clinical training dates. Students will not be able to transfer in any clinicals.

Students who have a Missouri, and/or NREMT EMT License may receive credit for RREMSA's EMT course work.

### **Advanced Placement**

Paramedic students who have partially completed a CoAEMSP accredited program may receive credit if the following are met:

Required prerequisites:

- All entry health requirements, background checks and drug screening
- MO EMT License
- Current AHA BLS CPR
- Anatomy and Physiology



## 2019 Paramedic Program

- Official transcripts and a letter from the Program Director of the initial institution must be sent to the administrative office, Attn: Program Director, Toni Milan. The letter must document that the student is in good standing and has met all required didactic and lab hours for the courses which credit is sought.
- Written examination testing in all courses for which transfer credit is sought. The decision score is 75%. Each exam can be taken one time.
- Skills demonstration equivalent to the skills taught in the course for which transfer credit is sought. A list of skills is available with the associated NREMT Portfolio paperwork. Students will be allowed to re-test skills one time.

Students are required to pay all academic fees associated with transfer credit evaluation or exemption examination.

Advanced Placement does not provide advanced placement based on other healthcare provider licensures. Advanced placement only applies to the Paramedic level.

The deadline to apply for advanced placement is EMS 303.

### **Experiential Learning**

Students with medical training, including nursing, military medical training, etc. are not given advanced placement in the EMS program.



2019  
Paramedic Program

## Application / Registration Process

1. Register for your class
  - \$150 (non-refundable/non-transferable)
2. Complete the following:
  - Drug Screening (additional fee)
    - Must be completed with our facility. Tests from other sites will not be accepted.
    - Must be completed within the last 3 months.
    - We will provide information on how to complete this.
  - Missouri Background Check (additional fee)
    - Visit [mocriminalrecords.com](http://mocriminalrecords.com) and click on “[Request A Search](#)”. Complete the requested information and when prompted send a copy to: [info@respondright.com](mailto:info@respondright.com)
  - Complete and pass an entrance exam (included with cost of registration fee)
    - Must schedule the entrance exam with administration.

After you have successfully completed steps 1 & 2, you will be required to complete the application packet. Application packets can be picked up at our office or downloaded from our website.

You will be required to submit the following:

1. Two recommendation forms (included in this application packet)
  - One of the recommendations must be from one of the following: a nurse, firefighter, paramedic, NP, PA or physician.
2. Copy of driver’s license, birth certificate or state ID to verify age.
3. Copy of social security card.
4. Copy of current Missouri EMT-Basic License.
  - Or a copy of your application for your EMT-B License.
5. Copy of health insurance card.
6. Submit documentation of a physical exam. This general physical exam needs to be performed by a MD, DO or NP within the last 12 months.
7. Copy of AHA BLS CPR card
8. Copy of Vaccination Records. You must provide the following: MMR or Antibody Titer Test, T-Dap, Flu shot (within season), Hepatitis B and Negative PPD in the last 12 months.
9. Complete Vehicle Information Form (form provided in application packet)
  - Submit License Plate Number, make and model of vehicle.
10. Acknowledgement of the form Course Demands
  - Must be signed and notarized
  - We are a notary. You can sign this when you drop off your packet. It must be signed in front of the notary.
11. Acknowledgement of the form Financial Commitment
  - Must be signed and notarized
  - We are a notary. You can sign this when you drop off your packet. It must be signed in front of the notary.

The Paramedic Program requires a minimum of 18 students to be enrolled to conduct a class. If class does not meet this minimum, you will be notified of the cancelled class and your options at that time.



**Respond Right EMS Academy / St. Charles Community  
College Consortium Paramedic Program**

**Paramedic Program  
Application Packet  
2019**



**Applicant Name:**

---



2019  
Paramedic Program

**Application Packet**

**The Application Packet contains the following 5 pages and must be turned in with COPIES of the following items in this order:**

1. Two recommendation forms (included in this application packet)
  - One of the recommendations must be from one of the following: a nurse, firefighter, paramedic, NP, PA or physician.
2. Copy of driver's license, birth certificate or state ID to verify age.
3. Copy of social security card.
4. Copy of current Missouri EMT-Basic License.
  - Or a copy of your application for your EMT-B License.
5. Copy of health insurance card.
6. Submit documentation of a physical exam.
  - This general physical exam needs to be performed by a MD, DO or NP within the last 12 months.
  - Your physician can use our exam template that is provided, or we will gladly accept your physician's physical exam form.
7. Copy of current AHA BLS CPR card
8. Copy of Vaccination Records. You must provide the following: MMR or Antibody Titer Test, T-Dap, Flu shot (within season), Hepatitis B and Negative PPD in the last 12 months.
9. Complete vehicle information form (included in this packet)
  - Submit License Plate Number, make and model of vehicle.
10. Acknowledgement of the form Course Demands
  - Must be signed and notarized
  - We are a notary. You can sign this form when you drop your packet off.
11. Acknowledgement of the form Financial Commitment
  - Must be signed and notarized
  - We are a notary. You can sign this form when you drop your packet off.



2019  
Paramedic Program

**Recommendation For Paramedic School #1**

Applicant Name: \_\_\_\_\_  
Last Name First Name

**Applicant Acknowledgment:**

As the applicant, I authorized the evaluator, named below, to submit confidential information based on the requested information. I understand this information will be used when determining my acceptance into the program.

**Applicant Signature:** \_\_\_\_\_

<b>Evaluator</b>	
Date:	
Name:	
Position/Title:	Employer:
Phone:	Email:
How long have you known the applicant?	
How do you know the applicant?	
<b>Please answer the following questions. Please be specific and honest with your answers. Feel free to use specific examples/incidents that have occurred in the past to support your answers.</b>	
<b>Motivation - How motivated is the applicant?</b>	
<input type="checkbox"/> Very little <input type="checkbox"/> Moderately <input type="checkbox"/> Highly	
Comments:	
<b>Maturity – How mature do you think the applicant is?</b>	
<input type="checkbox"/> Very little <input type="checkbox"/> Moderately <input type="checkbox"/> Highly	
Comments:	



2019  
Paramedic Program

Communication – How well do you think the applicant communicates?		
<input type="checkbox"/> Not well	<input type="checkbox"/> Adequately	<input type="checkbox"/> Very Well
Comments:		
As an evaluator for the above applicant, my final determination is:		
<input type="checkbox"/> I strongly recommend this applicant to be admitted to the Paramedic Program.		
<input type="checkbox"/> I have some reservations about recommending this applicant to the Paramedic Program.		
<input type="checkbox"/> I do NOT recommend this applicant to the Paramedic Program.		
Comments:		
Signature:		
Date:		



**Recommendation For Paramedic School # 2**  
**Completed by a medical professional**

Applicant Name: \_\_\_\_\_  
Last Name
First Name

**Applicant Acknowledgment:**

As the applicant, I authorized the evaluator, named below, to submit confidential information based on the requested information. I understand this information will be used when determining my acceptance into the program.

**Applicant Signature:** \_\_\_\_\_

<b>Evaluator</b>	
<b>RN</b>	<b>EMT-P</b>
<b>Firefighter</b>	<b>NP PA MD</b>
Date:	
Name:	
Position/Title:	Employer:
Phone:	Email:
How long have you known the applicant?	
How do you know the applicant?	
<p><b>Please answer the following questions. Please be specific and honest with your answers. Feel free to use specific examples/incidents that have occurred in the past to support your answers.</b></p>	
<b>Motivation - How motivated is the applicant?</b>	
<input type="checkbox"/> Very little <input type="checkbox"/> Moderately <input type="checkbox"/> Highly	
Comments:	
<b>Maturity – How mature do you think the applicant is?</b>	
<input type="checkbox"/> Very little <input type="checkbox"/> Moderately <input type="checkbox"/> Highly	



2019  
Paramedic Program

Comments:

**Communication – How well do you think the applicant communicates?**

Not well                       Adequately                       Very Well

Comments:

As an evaluator for the above applicant, my final determination is:

- I strongly recommend this applicant to be admitted to the Paramedic Program.
- I have some reservations about recommending this applicant to the Paramedic Program.
- I do NOT recommend this applicant to the Paramedic Program.

Comments:

Signature:

Date:





# History & Physical Examination

**TO THE EXAMINING PHYSICIAN/NURSE PRACTITIONER:** Please review the student's history and complete this form. This student has been granted provisional acceptance to an EMS training program pending physical exam result. The program will require the student to provide direct patient care. The information contained in this form will be released only with the student's consent.

<b>Last Name</b>	<b>First Name</b>	<b>Middle</b>	<b>DOB:</b>	<b>Sex: M/F</b>
------------------	-------------------	---------------	-------------	-----------------

## I. VISION & HEARING

Uncorrected Vision: R 20/____ L 20/____ Corrected Vision: R 20/____ L 20/____ Contacts: ____ Glasses: ____ No Correction: ____	Hearing Loss: Left: ____ Right: ____ Bilateral: ____ Hearing Aid: Left: ____ Right: ____ Bilateral: ____
--	---

## II. REVIEW OF SYSTEMS

If there are any abnormalities of the following systems, please describe fully, using additional sheets if necessary.					
	YES	NO		YES	NO
1. Head, Ears, Nose & Throat			7. Hernias		
2. Respiratory			8. Genitourinary		
3. Cardiovascular			9. Musculoskeletal		
4. Gastrointestinal			10. Skin		
5. Skin			11. Neuro		
6. Metabolic / Endocrine			12. Vision		



2019  
Paramedic Program

**III. IMMUNIZATIONS**

---

IMMUNIZATION	COMPELTED		COMPLETION DATE
	YES	NO	
1. Diphtheria/Tetanus (within 10 years)			
2. PPD			
3. Chest X-Ray for Positive PPD			
4. MMR or Proof of Positive Rubella Titer			
5. Hepatitis B or Proof of Positive Titer			
6. Flu Vaccine (Oct- March)			
7. Other			

**IV. HISTORY**

---

Is this person is free of chronic, contagious diseases: Yes \_\_\_\_\_ No \_\_\_\_\_

Is this person now or has this person been under the care of a psychiatrist or psychologist, for any medical or emotional condition which would preclude their involvement in the EMT/Paramedic Course or Profession?  
\_\_\_\_\_Yes \_\_\_\_\_No

If "YES" please describe your concerns:

\_\_\_\_\_

Is there any loss of or serious impairment of function of any organ: Yes \_\_\_\_\_ No \_\_\_\_\_

Recommendations for physical activity: \_\_\_\_\_

\_\_\_\_\_

Do you have any reservations about recommending this student to participate in the EMT or Paramedic Program?

\_\_\_\_\_

Do you recommend this student to participate in the EMT or Paramedic Program? Yes \_\_\_\_\_ No \_\_\_\_\_

**V. Physician or Nurse Practitioner**

---

Print Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Respond Right EMS Academy**  
 7491 Mexico Rd  
 St. Peters, MO 63376

Office: 636-387-6200  
 Fax: 888-859-9304

info@respondright.com  
 www.respondright.com



2019  
Paramedic Program

**Vehicle Information Form**

We are required to record the primary vehicle you will be driving to class and clinicals. This information will be shared with our partner clinical sites, so they are aware of your vehicle while on their campus.

Please be sure to provide the information of the vehicle that you will primarily be driving.

**Student Name:** \_\_\_\_\_

**Vehicle Make:** \_\_\_\_\_

**Vehicle Model:** \_\_\_\_\_

**Vehicle License #:** \_\_\_\_\_



# 2019 Paramedic Program

## **Acknowledgment of Course Demands & Expectations**

EMT and Paramedic training requires a tremendous amount of time and attention. Many students don't understand the time, energy and commitment that is required to complete this type of training. It is important to realize how much will be expected from you to complete this program. You must be ready to devote a considerable amount of time and attention to complete this training program. This will probably be one of the greatest accomplishments in your life.

This program requires your time and attention. You are required to study a significant amount of time outside of class. There is not enough time for us to read everything in the book to you. Adult education requires that you come prepared to class having read the chapters as outlined on the syllabus. We will do a significant amount of practice that will involve individual skills and scenarios. This requires that you have prepared and studied before class.

On average, a student would need to devote 1-2 hours of study time outside of class for each hour they are in class. This is a general guideline. Each student is different. You may require more time depending on the type of learner you are. You should be aware that you are studying a career that involves life-saving procedures. People will depend on you to be accurate and concise always. Errors will result in injuries to patients and even death. You are studying to become a proficient patient care provider, not to pass the next exam.

This type of training also requires a certain amount of physical activity. Standing, walking, sitting, lifting, carrying, pushing, pulling, climbing, stooping, kneeling, crouching, crawling, reaching, feeling, talking, hearing, seeing and lifting more than 125 lbs could be required throughout this program.

Because this type of life-saving education is so important, there are a few important rules and regulations you must understand:

- You are only allowed to miss 3 days of class. If you miss more than 3 days, you will be removed from the class. There are no exceptions. No refunds are issued.
- You are expected to be on time to class. Even one-minute late is considered tardy. Three tardies will equal one absence.
- You will not have an opportunity to withdraw or drop from the program after the first day of class. There are no refunds after the first day. No exceptions.
- You will be required to meet certain grade requirements and maintain a certain GPA. Each course has slightly different requirements, but you should be aware that if you don't meet the required grades, you will be removed from the course. If you are removed, for any reason, there are no refunds.

### **Signature of understanding**

I understand the 'Course demands & expectations' as stated above. I understand there will be additional demands and expectations that I will be informed of once class starts. I understand the demands and expectations as listed above.

---

Student Name

Date



2019  
Paramedic Program

**Acknowledgment of Financial Commitment**

Beginning the process of applying to the Paramedic course involves securing funds for your education and understanding your financial commitment. You should be starting the process of applying and securing funds at least 30 days before class. This will give you plenty of time to plan for any unexpected events and gather the required material.

You will have two options when deciding how to pay for your education.

**1. Make your full payment**

Tuition ..... \$10,325.00

Includes Course Fees and Tuition

Due at time of acceptance .....\$5,162.50

Due at least 10 days before the start of class .....\$5,162.50

\*Note - \$400 of your total cost is non-refundable and non-transferable.

Registration

Due with registration (non-refundable/non-transferable)..... \$150.00

**2. Payment Plan**

Total Cost (\$200 charged for financing) ..... \$10,525.00

Includes Course Fees and Tuition

Due at time of acceptance ..... \$5,300

Amount financed .....\$5,225

\*Note - \$400 of your total cost is non-refundable and non-transferable.

Due with registration (non-refundable/non-transferable) .....\$ 150.00

After the first day of class there are no refunds. If you decide to leave the program, withdraw, drop or are removed from the program, no refunds will be issued. You will be committed to the course. If you choose the payment plan, you will still be liable to pay any outstanding invoice costs for the program even if you decide to leave the program, withdraw, drop or fail out of the program. All program fees, costs and tuition has been earned by RREMSA on the first day.

**Signature of understanding**

I understand the 'Financial Commitment' as stated above. I understand there can be additional costs associated with this course, such as clothing, supplies, computers, etc. At this time, I understand the financial commitment as listed above and have the funds available to pay for class.

---

Student Name

Date



2019  
Paramedic Program

**Verification**

I hereby affirm and declare that the information provided in this application is true and correct to the best of my knowledge and that any fraudulent entry may be considered sufficient cause for rejection from this program. I agree to abide by the Respond Right EMS Academy rules, regulations, policies and guidelines as well as the directions of the Program Director.

I hereby affirm that I have read the ‘Course Demands & Expectations’ in the application. I understand the demands and expectations as listed. I understand there will be additional demands and expectations that I will receive on the first day and throughout the course.

I hereby affirm that I have read the ‘Financial Commitment’ in the application. I understand the financial commitment to be accepted into this course as listed. I understand I must be able to pay my tuition in full 10 days before the start of each course. If I am unable to do this, I will be removed from the course and I will lose my application fees and registration fees.

I acknowledge that the application and information that has been submitted on-line during registration is true and accurate. Falsifying information will exclude me from the program.

I understand this application is only valid for the Paramedic Program stated on the application. I understand that if I choose to apply, register or enroll in a different session, I will be required to fill out a new application and pay the registration fee.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

STATE OF MISSOURI )

COUNTY OF \_\_\_\_\_ )

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

