Paramedic Program Admittance Requirements

Application Process:

Applications are due no later than November 15, 2024. The application will not be considered if:

- It is not complete.
- Renewable immunizations are out of date (e.g. TB, Tetanus).
- Required licenses/certifications are out of date.

Any incomplete applications will not be processed.

Interview Process:

Once all completed applications are received and confirmed, the student and student liaison will receive an e-mail confirming an interview time. Interview dates are as follows:

- Interviews for Poteau Kiamichi Tech students will be in person on December 5th.
- Interviews for Distance Learning Sites will be December 6th via ZOOM.
- If you are unable to interview on one of the above dates, you may interview on Dec 10th.

All students and liaisons will know who is accepted into the program by close of business Friday, December 13, 2024.

Signing Event Process:

On Thursday, January 16, 2025 there will be a signing event. All students will be required to attend this event at their school of enrollment. This event will be conducted in part over ZOOM to allow all students to connect. Immediate family/friends are highly encouraged to attend. Goals of this event are as follows:

- Welcome and acclimate new Paramedic students to each other and their campus.
- Allow family and friends to learn more about the expectations of their Paramedic student and the rigor of the program.
- Showcasing commitment to completing the program and becoming a Paramedic.

First day of class begins February 4, 2025 at 9:00 am

Please remember the first step is for the student to have a completed application. This means Work Keys/comparable test scores and learning styles must be sent in with the application to be considered complete.



EMS Paramedic Program Application

Work Keys Test (minimum score of 5 in each category is recommended) Student Application Personal Health History Physical Examination Form Student's Work Reference Student's Personal Reference

Copies of the following:

High School Diploma/GED or equivalent College transcripts (optional) Current BLS HCP Card exp______ NREMT Certification exp ______ State EMT License exp______ Drivers License exp ______ Shot Record Hepatitis B Record or Waiver Chicken Pox / MMR Current TB Test exp _____ Current Tetanus exp _____ Current Seasonal Influenza Vaccine (will be available fall 2025) exp_____ COVID 19 (optional - facility discretion)

"Completed" Paramedic Application Due November 15, 2024

If applying for Financial aid, applications MUST be completed ASAP, prior to start of class 2/4/25

I have read and understand the information concerning the Kiamichi Tech Paramedic Program listed on page 1 & 2.

Signature

Date

Clinicals <u>cannot</u> be obtained at place of employment.



Paramedic Program Information

Program Cost: Price subject to increase. **In-district** \$ 4,035.20

Out-of-district \$ \$ 6,535.20

Textbooks to include:

✤ A&P for Emergency Care

Paramedic Principles and Practices

Basic Arrhythmias

✤ AHA/ECC Handbook

ACLS Provider

PALS Provider

Out-of-state \$ 9,035.20

Kiamichi Tech Paramedic Course Tuition will include:

- Drug testing
- Background checks
- ✤ Liability insurance
- Student picture ID badge & safety vest
- NREMT CBT fee (first attempt only)
- PALS and ACLS training with ecard
- FISDAP fees
- Graduation fee

NOTE:

- Distance learning sites cost will differ from Kiamichi Tech (KT)
- Out of district/state students will be charged out of district/state tuition
- Distance learning sites <u>MUST</u> travel to KT Poteau for ACLS, PALS, Practical Skills testing and any special classes.
- Students will be required to participate in fundraisers or pay class dues. The modality will be voted by the class.
- All monies obtained will be deposited into the student activity fund. Student activity money is **not** included in tuition.

Certain clinical sites may charge a fee to schedule clinical rotations at their location. This cost is **not** included in tuition.

Uniforms will consist of (not included in cost of tuition):

- Black slacks (no jeans) & black belt
- Kiamichi Tech Clinical Polo
- Black EMS footwear (no tennis or dress shoes)

*Some clinical sites may require a special uniform, such as operating room will require scrubs. The EMS Director must approve any uniform change.

In order to achieve the paramedic technical standards, a student must be able to perform the job analysis tasks:

- Assist in lifting and carrying injured and/or ill persons to and from the ambulance.
- Engage in pushing and/or pulling to assist in extrication of a patient pinned beneath and inside a vehicle, and in vehicles with electrical hazards
- Walk, stand, lift, carry, and balance in excess of 125 pounds without assistance, (250 pounds with assistance) while lifting, pulling, pushing and carrying a patient.
- Stoop, kneel, bend, crouch and crawl on uneven terrain to gain access to a patient.
- Climb stairs, hillsides, and ladders to gain access to a patient.
- Communicate verbally in person, via telephone and radio equipment.
- Work in chaotic environments with loud noises and flashing lights.
- Perform patient assessments, implement treatment, and calculate weight and volume ratios under threatening time constraints.
- Work effectively in low light, confined spaces, extreme environmental conditions and other dangerous environments while remaining calm.
- Locate the scene of an emergency by reading maps and responding safely and quickly to the location as directed by the dispatcher while observing traffic ordinances.
- Perform fine motor movements while in stressful situations and under threatening time constraints.
- Perform major motor movements as required to operate the ambulance stretcher, and equipment.



Paramedic Student Application

Please print or type clearly

DISTANCE LEARNING SITE/CAMPUS	Date:
Student: First Middle Initial	Last
Mailing Address:	City Zip
Home Phone Work Phone:	
Social Security: Emplo	yer:
Circle Highest Level of Education: HS GED College	: 1 2 3 4 Date of Birth:
Race: Hispanic Native American Asian Black Hawa	aiian/Pacific Islander White Other
Email address:	
Person to be notified in case of an emergency	Phone:
I currently hold the following health/medical certification	ns:
Please describe any previous health/medical work exper	ience:
I have taken the following health/medical classes:	
NOTICE: Please indicate by signing below, that you have read a requires Oklahoma Technology Centers to run a National Backg	
Please understand NREMT has the authority to deny a license to Background checks will be mandatory in the Paramedic Program	
Have you ever been convicted of a felony? YES	NO
Yes, I have read and understand the program information and sta application is correct, to the best of my knowledge.	atement above. The information I have given in this
Signature:	Date:
PLEASE NOTE: Completed applications (including all current immunization	ons and licenses) must be received in the EMS by Nov 15, 2024.
PLEASE NOTE: Completed applications (including all current immunizations) Mailto: KiamichiTech EMS, PO Box 825, Poteau, OK 74953. If you have any questions	

Employment History

Business Name & Superv	isor:	 	
City/State/Zip:		 	
Position Held:			
Date From:	Date To:		
Reason for Leaving:		 	
Business Name & Superv	isor:	 	
City/State/Zip:		 	
Position Held:			
Date From:	Date To:		
Reason for Leaving:			
Business Name & Superv	isor:	 	
City/State/Zip:	<u> </u>	 	·····
Position Held:			
Date From:	Date To:		
Reason for Leaving:			

Personal Health History

Name (Please Print):			Date:		
Do you have a history of: Heart disease Hypertension Tuberculosis Diabetes Epilepsy Seizures Migraine Frequent Headaches Arthritis Emotional/Nervous disorder Physical Disabilities Learning Disabilities If you answered "yes" to any of	YES the above, pl	NO ease explain.			
Have you even been treated for If you marked "yes", please exp		nt or injury?	YES	NO	
Are you currently taking any me If yes, please list the medication		YES rently taking.	NO		
			Date:		

Student Signature

Kiamichi Tech Physical Examination Form

			Date	2:	
Student	's Name – Please TO BE	e Print C OMPLETED BY A I		٨	
ALL AREAS MUST	-	TED BEFORE FINA			GRAM.
Blood Pressure:			Pulse:		
Height:	_ ft	in.	Weight:		lbs
Eyes: Vision: R	L		Corrected: R	L	
Hearing: R	L				
Heart:			Lungs:		
Abdomen:			Hernia:		
Skin:					· · · · · · · · · · · · · · · · · · ·
Lifting Restrictions, i	f any:				
Tuberculosis Skin	Test:		Signature		Date
	Kesun	5	Signature		Date
Attach Copies or of					
Hepatitis B Vacci	ne record	_ Measles, Mumps & F	(or letter of attestation		Influenza
	PHYSICIA	N'S REMARKS AND	RECOMMENDATI	ONS	
Is this individual in s Is this individual cap Comments/Recomme	able of perfo				NO NO
Physician Name (prir	nt):				
Physician Signature:					
Phone#:					
Address:		City		State	Zip

Student's Work Reference

(This form is to be filled out by a current or previous supervisor or co-worker.)

Student Name:	Date:	

Mr. /Mrs. /Ms. _____has applied for admission to Kiamichi Tech and has given your name as a reference. In order to be considered for the program, we need your candid opinions as to the applicant's suitability to perform the duties of a Paramedic.

ALL INFORMATION WILL BE KEPT CONFIDENTIAL.

Thank you for your time.

1. How long have you known the applicant?			
2. In what relationship have you known the appli	cant? Superviso	r	or Co-worker
3. Did the person have any problems in attendan	ce? Yes	No	If yes, please explain:
4. Did the person have any problems with tardine	ess? Yes	No	
5. What positive qualities or characteristics does t ability to succeed in the medical field?	••••••		
6. Does the applicant have any characteristics tha succeed?	-		with his/her ability to
Please use the back of this form to make any add Thank you for your assistance.	itional comments	you ma	iy have.
Print Name:			
Signature:	Da	ate:	
Address:			
Title:	Phone:		

Student's Personal Reference

Student Name:	Da	ate:

Mr./Mrs. /Ms. _____has applied for admission to Kiamichi Tech and has given your name as a reference. In order to be considered for the program, we need your candid opinions as to the applicant's suitability to perform the duties of a Paramedic.

ALL INFORMATION WILL BE KEPT CONFIDENTIAL.

1.	How long have you known the applicant?
2.	In what relationship have you known the applicant? Friend Family
3.	What positive qualities or characteristics does the applicant possess that would contribute to his/ her ability to succeed in the medical field?
4.	Does the applicant have any characteristics that might tend to interfere with his/her ability to succeed?
	Thank you for your assistance.
	Print Name:Date:Date:
	Signature:
	Address:
	Phone:

Student's Personal Reference

Student Name:	Da	ate:

Mr./Mrs. /Ms. _____has applied for admission to Kiamichi Tech and has given your name as a reference. In order to be considered for the program, we need your candid opinions as to the applicant's suitability to perform the duties of a Paramedic.

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4.	Does the applicant have any characteristics that might tend to interfere with his/her ability to succeed?
	Thank you for your assistance.
	Print Name:Date:Date:
	Signature:
	Address:
	Phone:

Applicant Questionnaire

Give two specific reasons why you want to enter the paramedic program:

1	
2	
Tell us something interesting about yourself:	
What motivated you to decide to come to school at this time?	

If chosen for an interview, listed below are some tips for your success.

- 1) Make time for practice. Study how you are delivering answers.
- 2) Prepare answers to common questions, example: How would your colleagues describe you?
- 3) Remain professional from start to finish.
- 4) Dress for the job. Look professional.
- 5) Prepare for small talk. Be positive during the conversation.
- 6) Use calming techniques:
 - Arrive early
 - Be prepared
 - Check your appearance
 - Take deep breaths
 - Smile
 - Show confidence
 - Ask questions
- 7) Be authentic