

REGISTRATION
INFORMATION

Emergency Medical Technician



rev. October 2020

ALABAMA FIRE COLLEGE
AND PERSONNEL STANDARDS & EDUCATION COMMISSION

ALABAMA FIRE COLLEGE AND PERSONNEL STANDARDS AND EDUCATION COMMISSION

EMERGENCY MEDICAL TECHNICIAN is an intensive, fast-paced course, taught by experienced Paramedics. Attendance is mandatory, and class meets from 6pm-10pm. Students are encouraged to read the assigned text and complete the assignments in order to successfully complete this course. This course is required to apply for licensure as an EMT. This course is based on the Emergency Medical Technician National Standard Curriculum. Successful graduates are eligible to take the National Registry certification exam and advance to Advanced EMT.

Students are given insights into the theory and application of concepts related to the profession of emergency medical services. Subject matter includes: EMT Operations and Safety, Trauma Management, DOT Laws and Regulations, Infectious Diseases, Blood-borne Pathogens/Universal Precautions, OB/GYN, Airway Management, Neurological Emergencies, Cardiac Emergencies, Environmental Emergencies, and Medical Emergencies. Healthcare Provider CPR is taught and students are certified at the beginning of the class.

Admission Requirements

	Course/program may be entered at 17 years of age, but the student must turn 18 before the end of the course/program.
	High school diploma or equivalent. If using VA benefits, official transcripts must be obtained from all schools attended, including military transcripts.
	Current valid driver's license. Faxed copies are not accepted.
	Applicant meets essential functions or technical standards for the EMS program, as directed by the Alabama Department of Public Health office of EMS and Trauma, with form completed and signed
	Completed and signed application to the Program in Emergency Medicine, including all required documentation
	Signed Statement of Understanding
	Physical Examination forms included in application, signed by a licensed physician (or such physician's designee)
	Clear criminal background check and drug screen test, to take place after the course begins. The fee will be paid to an agency representative at Orientation.
	Verification of health insurance or signed waiver
	Proof of a Tuberculosis (TB) skin test within the past 12 months. If the test result was positive, the student must have a clear chest x-ray.
	Proof of Tetanus vaccination/booster, or signed waiver. Tetanus vaccination/booster cannot be over ten years old.
	Proof of Mumps, Measles, Rubella (MMR) vaccination or titer (vaccination records)
	Proof of Hepatitis-B vaccinations. If administered over one year prior, a titer or signed waiver is required.

Withdrawal/Refund Policy

Students who register for a course and wish to withdraw in good standing must submit a written request by e-mail to registration@alabamafirecollege.org, to be received prior to orientation in order to receive a full refund. VA students are not charged any tuition if they no-show a class or withdraw the first day, thereafter the tuition is due in full.

Refunds are calculated according to the following: (If the student or agency is paying full tuition)

Once the student or agency pays and the student sits through Orientation, then the student decides to withdraw, \$175 will be deducted from the amount of tuition paid.

- Withdrawal during 1st week – 75% of tuition refund
- Withdrawal during 2nd week – 50% of tuition refund
- Withdrawal during or after 3rd week – no refund

How to apply

Students must submit the full admission packet, with method of payment, at the time of registration. *The admission packet will be returned if not complete and signed.* An electronic signature will be considered as legally binding as a document signed in ink.

Mail: Alabama Fire College, Registration, 2501 Phoenix Drive, Tuscaloosa, AL 35405
Email: registration@alabamafirecollege.org

Location of Training Facility/Department			
Course Title: Emergency Medical Technician		Begin Date	End Date

Individual Information:

SSN				DOB (MM/DD/YYYY)			Gender		Previously registered?	
							M	F	Yes	No

Last Name			First Name			Middle Name			Maiden/Former Name		

Street Address			City			County			State		Zip Code	

Email				Cell Phone Number				Work Phone Number			

Department-sponsored information, if applicable:

Department sending you for training				Training Officer / Fire Chief			

Email				Cell Phone Number				Work Phone Number			

Acknowledgments:

Hold Harmless: I acknowledge that I could be injured during the training and drills offered to me by the Alabama Fire College. I accept that risk of injury, and in exchange for being allowed to participate in this training and drills, release the Fire College, its instructors, and its employees from any claims for injury.											
Signature of Student											

Honor Statement Policy: During any phase (academic or practical) of an Alabama Fire College course (coursework, evaluation, project, practical/skills exam, cognitive/written exam) cheating, in any form, is prohibited. Cheating, in any form, is acting dishonestly to gain an unfair advantage. Cheating includes but is not limited to: giving or receiving unauthorized aid on any assignment, quiz, or exam; plagiarism, using the ideas of another and declaring it as one's own; and stealing, taking without permission. During a certification exam, any of the following acts, constitutes academic fraud and could be subject to penalties, including but not limited to, dismissal from and failure of the examination: Looking at another candidate's exam; Attempting to take an exam for someone else; Attempting to remove an exam from the room in any form; Talking to another candidate; Possession of any device capable of recording or transmitting data, including but not limited to, photography and audio recordings											
<input type="checkbox"/> By checking this box, I acknowledge I have read and understood the Honor Statement Policy.											

Course Withdrawal Policy: Students who register for courses and fail to attend will be charged the full registration fee. To receive a full refund, all cancellations or withdrawals must be received in writing to Registration (registration@alabamafirecollege.org) at least two weeks prior to the beginning of class. Students will receive full refunds for courses canceled by the Alabama Fire College.											
<input type="checkbox"/> By checking this box, I acknowledge I have read and understood the Course Withdrawal Policy.											

Prerequisite Requirements: Courses may have prerequisites that include either certification or proof of training. Forward all required certificates or proof of training with this registration form. Students not meeting prerequisite requirements will not be certified. Sitting for a test does not guarantee certification. Students not certifying will receive a Certificate of Attendance only. Prerequisites must be a certificate from an agency accredited by either ProBoard or IFSAC. (VA Students must be documented that they meet prerequisites before beginning a class.)											
<input type="checkbox"/> By checking this box, I acknowledge I have read and understood the Prerequisite Requirements.											

Felony Conviction Statement: I hereby affirm and certify, under penalty of perjury, that I have not been convicted of a felony and that I am not in violation of Alabama Administrative Code 360-X-1-.01(3)(e)1-2. I attest that all information provided herein is true and accurate to the best of my knowledge.											
<input type="checkbox"/> By checking this box, I acknowledge I have read and understood the Felony Conviction Statement.											

Photo Release Statement: I hereby authorize the staff of the Alabama Fire College to use, reproduce, and/or publish photographs and/or video that may pertain to me, including my image, likeness and/or voice without compensation. I understand that this material may be used in various publications, public affairs releases, recruitment materials, broadcast public service advertising (PSAs) or for other related marketing endeavors. This material may also appear on the Alabama Fire College's website and other related social media sites. This authorization is continuous and may only be withdrawn by my specific revocation of this authorization in writing. If I do not wish to agree to this release statement, I will alert my instructor at the beginning of the class as such.											
<input type="checkbox"/> By checking this box, I acknowledge I have read and understood the Photo Release Statement.											

(Signature) I attest that the above is true and accurate.

Date

EMERGENCY MEDICAL TECHNICIAN

TUITION & FEES

Last Name	First Name	Middle Name	Maiden/Former Name

METHOD OF PAYMENT (If applicable)

Cash

Check (DL # & valid phone number must be listed on check)

Money order

Purchase order (copy of PO with details required upon registration)

Credit card

Credit card information:

<input type="checkbox"/> American Express	Name on Credit Card
<input type="checkbox"/> Discover	
<input type="checkbox"/> MasterCard	
<input type="checkbox"/> Visa	
Credit Card Number	
Expiration Date	
CCV #	

Effective 10/01/18	In-State	Out-of-State	Please note:
EMT Tuition	835	1670	Must be paid at time of registration.
Clinical Insurance Fee	16	16	Must be paid at time of registration. Renews every January.
Drug Screen & Background Check	70	70	Paid directly to the screening agency <u>on the first night of class.</u>

Prices are not included in tuition, and are subject to change.

\$34.50-\$36.50	AFC navy golf shirt with logo
\$20	Stethoscope
\$2	Pen light
\$20.99	Safety vest
\$4.95	Safety glasses
\$2	Masks 3M
\$3.50	Shears Blue
\$25	BLS-HCP Code
\$149.95	<i>Emergency Care and Transportation of the Sick and Injured, 11th edition</i>
\$15	Platinum Planner Scheduling

Students are also required to have:
Khaki pants
Black leather belt
Black non-porous shoes

How to order supplies from the AFC Bookstore:

- In person:** Alabama Fire College Bookstore, located on the main campus in Tuscaloosa
- By phone:** 1(866)984-3545
- Online:** www.afcbookstore.com

EMERGENCY MEDICAL TECHNICIAN

REQUIRED BACKGROUND INFORMATION: The following information is required by the Alabama Department of Public Health EMS Division (ADPH) and the National Registry of Emergency Medical Technicians (NREMT). A 'yes' answer will need to be addressed immediately with the ADPH and/or NREMT and may affect your ability to become credentialed and/or licensed. To contact the ADPH, call (334)206-5383 or visit www.adph.org/ems. To contact the NREMT, call (614)888-4484 or visit www.nremt.org.

Have you ever been convicted of a drug violation?	Yes	No
Have you ever been addicted to drugs or alcohol?	Yes	No
Have you ever been convicted of a felony charge?	Yes	No
Have you ever been convicted of a DUI?	Yes	No
Have you ever been treated for mental illness?	Yes	No
Have you been diagnosed with a medical limitation such as epilepsy or diabetes? <i>If yes, please explain on a separate sheet of paper and attach to this form.</i>	Yes	No
All students enrolled in Alabama Fire College Program in Emergency Medicine are required to submit to and pass both a drug screen test and a background check. The student is responsible for the cost. Are you willing to submit to, and pay for, an initial drug screen and background check, as well as random screening, if required by the Program and/or a clinical affiliate?	Yes	No
Have you read the Essential Function Standards/Requirements?	Yes	No
Are there any current or previous medical conditions, illnesses, or medications which may affect your ability to meet the demands stated in the Essential Function Standards/Requirements?	Yes	No
If you answered 'yes' to the previous question, please explain:		

I understand that completion of this application is a component of the admission process for Alabama Fire College Program in Emergency Medicine. I certify that the information given in this packet is true and correct. I understand that providing false information may be deemed sufficient reason to dismiss the student and/or refuse admission. Admission to the program is competitive, and the number of students is limited by the number of faculty and clinical facilities available. Meeting minimal requirements does not guarantee acceptance.

Applicant Signature	Date

EMERGENCY MEDICAL TECHNICIAN

ESSENTIAL FUNCTION STANDARDS/REQUIREMENTS

The Alabama Fire College endorses the Americans with Disabilities Act. Physical, cognitive, psychomotor, affective and social abilities are required in unique combinations to provide safe and effective emergency medical care. Admission, progression and graduation are contingent upon the student/applicant's ability to demonstrate the essential functions delineated for Alabama Fire College Program in Emergency Medicine with or without reasonable accommodations throughout the program of learning.

The purpose of this document is to state physical and mental qualifications necessary to be successful in the workplace. Alabama Fire College Program in Emergency Medicine and/or its affiliated clinical agencies may identify additional essential functions. Alabama Fire College Program in Emergency Medicine reserves the right to amend the essential functions as deemed necessary.

The EMT essential function requirements include but are not limited to the ability to:

Physical Demands:

1. Physical ability to walk, climb, crawl, bend, push, pull, lift, and balance over less than ideal terrain
2. Good physical stamina and endurance, which would not be adversely affected by having to lift, carry, and balance, at times, in excess of 125 lbs, or 250 lbs with assistance
3. See different color spectrums
4. Have good hand-eye coordination and manual dexterity to manipulate equipment, instrumentation, and medications

Requirements for problem solving abilities, data collection, judgment, and reasoning:

5. Send and receive verbal messages as well as appropriately operate the communication equipment of current technology
6. Collect facts and organize data accurately, to communicate clearly both orally and in writing using the English language (9th grade level or higher)
7. Differentiate between normal and abnormal findings in the human physical conditions by using visual, auditory, olfactory, and tactile observations
8. Make good judgment decisions and exhibit problem-solving skills under stressful situations
9. Be attentive to detail and aware of standards/rules that govern practice, and implement therapies based upon mathematical calculations (9th grade level or higher)
10. Possess sufficient emotional stability to be able to perform duties in life or death situations and in potentially dangerous social situations, including responding to calls in districts known to have high crime rates
11. Handle stress and work well as part of a team
12. Be oriented to reality and not mentally impaired by mind-altering substances
13. Not be addicted to drugs
14. Work a shift of 24 hours in length
15. Tolerate exposure to extremes in the environment including variable aspects of weather, hazardous fumes, and noise
16. Possess eyesight in a minimum of one eye correctable to 20/20 vision and be able to determine directions according to a map. Students who desire to drive an ambulance must possess approximately 180° peripheral vision capacity must possess a valid driver's license, and must be able to safely and competently operate a motor vehicle in accordance with state law.

EMERGENCY MEDICAL TECHNICIAN

ESSENTIAL FUNCTION STANDARDS/REQUIREMENTS

An individual who discloses a disability may request reasonable accommodations. Individuals will be asked to provide documentation of the disability in order to assist with the provision of appropriate reasonable accommodations. The College will provide reasonable accommodations but is not required to substantially alter the requirements or nature of the program or provide accommodations that inflict an undue burden on the College. Requests for reasonable accommodations should be directed to Registration at Alabama Fire College.

I have reviewed the essential functions for this program and I certify that to the best of my knowledge I have the ability to perform these functions. I understand that a further evaluation of my ability may be required and conducted by Alabama Fire College Program in Emergency Medicine faculty if deemed necessary to evaluate my ability prior to admission to the program and for retention and progression through the program.

Applicant Signature	Date

OR

I have read and understand these essential functions and, to the best of my knowledge, I will be unable to perform function # _____ due to a disability. I understand that I need to provide documentation of my disability and recommendation for accommodations from my physician. This information must be provided to Registration at the Alabama Fire College.

Applicant Signature	Date

If you answered "unable to perform" in the above statement, please explain.

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Non-Discrimination Statement: It is the official policy of Alabama Fire College that no person shall, on the grounds of race, color, disability, sex, religion, creed, national origin, or age, be excluded from participation in, be denied the benefits of, or shall be subject to discrimination under any program, activity, or employment.

EMERGENCY MEDICAL TECHNICIAN

STATEMENTS OF UNDERSTANDING

Statement of Understanding: Commission of a Felony

I understand that commission of a felony may prevent or impede my taking the appropriate Registry Exam administered by the National Registry for Emergency Medical Technicians and to become licensed by Alabama Department of Public Health. The authority to approve applicants for the registry examinations rests with the National Registry.

Statement of Understanding: Background Screen Checks

I understand that every student who enrolls in Alabama Fire College Program in Emergency Medicine and desires to participate in courses which have a clinical component is required to have a Background Screen Check. A student who is refused acceptance for clinical experience due to a positive background screen will not be able to complete the clinical component of the required courses and will not receive a passing grade for the course.

Statement of Understanding: Weapons Policy

I understand that possession, (while on College-owned or controlled property), of firearms, ammunition, explosives, fireworks, or other dangerous instrumentalities is prohibited. Violations of the policy will render a student subject to disciplinary action under the procedures which provide for adequate notice and fair hearing. Penalties for violations may include reprimand and probation, loss of privileges, suspension, expulsion, and other penalties which may be set forth in the College regulations.

Statement of Understanding: Pre-Clinical Drug Screen

I understand that every student who enrolls in Alabama Fire College Program in Emergency Medicine and desires to participate in courses which have a clinical component is required to have an initial pre-clinical drug screening. The student must abide by the College's Drug Screen Policy and Agency Clinical Policy for which the student is assigned clinical practice. This policy includes reasonable suspicion screening.

Statement of Understanding: Student Classroom Behavior

I understand that students are expected to give courtesy to others while in class, show a willingness to respond to questions and participate in class discussions, and have a lively interest in the subject matter, as evidenced by alertness and attentiveness during classroom activities. The College and the program have "zero tolerance" for disruptive class behavior. Since enrollment in college is by choice, students who fail to demonstrate common courtesy and cooperation in the classroom are choosing, by their behavior to cancel their enrollment. The EMS Group Supervisor will be notified of all such violations and appropriate steps taken. Special health problems will be considered on an individual basis. Visitors (including children) are not allowed in the classroom.

Statement of Understanding: Possibility of Non-Traditional Work Hours and Weekend Assignments

I understand that availability of clinical sites will determine clinical placement and there may be some non-traditional work hours and weekend assignments (i.e. 3pm-11pm, 11pm-7am, etc.).

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Student Name (print)			
Signature of Student		Date	
Student SSN		Phone	

EMERGENCY MEDICAL TECHNICIAN

HEALTH HISTORY INFORMATION

Student Name (print)		DOB	
Student SSN		Gender	M F
Address			
City		State	
		Zip Code	

Has the student ever:		Yes	No	If 'yes' please explain.
a.	lost consciousness due to injury?			
b.	had a concussion?			
c.	stayed overnight in a hospital?			
d.	had an operation?			
e.	had heat exhaustion or heat stroke?			
f.	had a broken neck or neck injury?			
g.	had a back or spinal injury?			
h.	had a heart murmur?			
i.	had high blood pressure?			
j.	had a heart problem?			
k.	fainted while doing exercise?			
l.	lost an extremity?			

Note: No pregnant student will be accepted into the program without written approval from the student's physician and/or approval from the EMS Medical Director.

The information presented in this medical history is accurate to the best of my knowledge, and I have no medical conditions or illnesses that would prevent my participation in all EMS training activities. In addition, I have read the "Essential Functions" for the program and meet all physical demands, problem solving abilities, and working characteristics required.

Signature of Student		Date	
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EMERGENCY MEDICAL TECHNICIAN

MEDICAL EXAMINATION FORM

Student Name (print)					
Height		Weight (lbs.)		Is the student able to communicate verbally?	Yes No
Vision Status	Left eye: 20 /	Right eye: 20 /	Corrected:		
Blood Pressure	/	Pulse Rate			

	Normal	Abnormal	If 'Abnormal' please explain.
Skin			
Head & neck			
Eyes			
Ears, nose, & throat			
Teeth & mouth			
Lungs & chest			
Cardiovascular			
Abdomen & lymphatics			
Genitalia/hernia			
Neurological			

Orthopedic screening:

Upper extremities			
Lower extremities			
Spine & back			

Date of Tetanus / Booster (cannot be over 10 yrs)			
Date of Mantoux PPD (TB) Test		Results:	
Date of Chest X-ray		Clear?	Yes No
Date of Measles Vaccination		Exempt	Immune
Dates of Hepatitis Vaccination	1:	2:	3:

Additional comments

The student has provided me a copy of the "Essential Functions" for the Program, and he or she is able to perform these functions. This is to certify that on this _____ day of _____, _____, I performed the above limited examination of _____ and based upon the medical history given, and upon my evaluation, I am of the opinion that he/she IS _____ / IS NOT _____ physically and medically able to participate in Alabama Fire College Program in Emergency Medicine.

Physician's Signature	Date	Phone
Physician's Name		
Address		