PARAMEDIC PROGRAM APPLICATION PROCESS

The Emergency Medical Technology Department at Columbus State Community College accepts applications for their Paramedic Program year round.

Class times are as follows:

Daytime Program schedule:
Tue, Wed, Thurs: 08:00 – 12:00
Hospital CL: Tue, Wed, Thur: 13:00 - 17:00
Field CL: Flexible Schedule

Afternoon Program schedule:
Tue, Wed, Thurs: 12:00 – 16:00
Hospital CL: Tue, Wed, Thur: 1700 - 2100
Field CL: Flexible Schedule

Mandatory Field Clinical requirement for all students to be determined by faculty.

Below are the requirements for this *competitive program:

- Be a certified EMT in the State of Ohio.
- Completion of the Columbus State Paramedic Prep Course (EMS 1002) with a minimum grade of 75%.
- Completion of the FISDAP Paramedic Entrance Exam** within the past 12 months. • A letter of recommendation written by your EMT instructor or your immediate supervisor at your place of employment.
- Complete and submit the attached Paramedic Program application
- Applications should be hand delivered to an EMS staff member in a sealed envelope. The date and time the application is received will be documented on the application.
- Copies of your State of Ohio EMT card, IS 100, and IS 700 certificates must be submitted with the application.

If you have any questions please contact 614-287-2519 or email kalexan1@cscc.edu

*We accept 24 students into each of our classes. This is a competitive process. Students are awarded points based of the following criteria: FISDAP score, previous college course work, relevant patient care experience, and current ALS affiliation.

FISDAP Paramedic Entrance Exam will be given during EMS 1002 Paramedic Prep Course or by appt. only. Students with applications will be notified of the date, time and location. You will need to bring a credit card with you to pay the fee for the test. (Approximate Cost $25.25)

Paperwork deadline for January Paramedic Program start is always 12N the Friday before Thanksgiving week. Paperwork deadline for August Paramedic Program start is always 12N the 3rd Friday in July.

COLUMBUS STATE
COMMUNITY COLLEGE

Emergency Medical Services Program

FINGERPRINT AND DRUG SCREEN

Before Starting:

- **A valid email is REQUIRED**
  (if you do not have an email account you can establish a free account at Yahoo.com)

- You must be near a printer to print forms.
- Please review your authorization form closely, as you will have a limited amount of time to complete your drug test.

Getting Started:

1. Have your credit card/debit card (Visa/MasterCard/American Express/Discover) information ready in order to process payment. Your credit card will be charged **$112.25** for the service.

2. Log onto our website at **www.VerifyStudents.com**

3. Use this special promotional code: **COLU8435**

4. Complete profile & e-sign forms as they appear

5. **Print Fingerprint Control Form** (sample form shown below on left)

6. **Schedule your drug test**
   a. **Print the authorization form** (sample form shown below on the right) *or*
   b. **Check your email and click the link to show the form on your smartphone**

After completing online process:
1. Drug testing: go to collection site listed on authorization form
- Be prepared to show the authorization form & government photo ID, e.g. – driver's
2. Fingerprinting
- Bring Fingerprint Control Form & government photo ID, e.g. – driver's license to your school's designated fingerprint location:

Columbus-Fast Fingerprints
1486 Bethel Road (**Inside Bethel Centre**)
Columbus, Ohio 43220
(877) 932-2435

Hours: 8:00am-5:00pm Monday-Friday, 9:00am-12:00pm Saturday. WALK-INS WELCOME!
All network fingerprint site locations and hours are subject to change without notice.

NOTE: A unique login will be emailed to you. This will allow you to log back into **www.VerifyStudents.com**

COLUMBUS STATE

EMERGENCY MEDICAL TECHNOLOGY

PARAMEDIC PROGRAM APPLICATION PROCESS

Which session are you applying for? Please rank in order of preference.

☐ **Morning**　　☐ **Afternoon**　　☐ **First Available**

Applicant Information

Cougar ID: _____

Full Name: _____　Date: _____
　　　　　　　Last　　　　　　　　　*First*　　　　　　　　　*M.I.*

Address: _____
　　　　　　Street Address　　　　　　　　　　　　　　　　　　　　*Apartment/Unit #*

　　　　　　_____
　　　　　　City　　　　　　　　　　　　　　　　　　　*State*　　　　*ZIP Code*

Home Phone: _____　Cell Phone: _____

CSCC Email Address: _____Personal Email Address: _____

Ohio EMT Certification Number: _____　　Expiration Date: _____

National Registry Number: _____　　Expiration Date: _____

Completion of IS 100　Date:_____　　Completion of IS 700　Date:_____

Have you ever had an EMT or health care certificate of any type revoked in any state?　　Yes: ☐　　No: ☐

If yes, when and where? _____

Have you ever been enrolled in a paramedic?　　Yes: ☐　　No: ☐

Do you feel that you are physically fit, of good moral character, and motivated to serve independently as a paramedic?

Yes: ☐　　No: ☐

If yes, when and where? _____

Tell us why you think you would make a great paramedic, use
an additional sheet if necessary.

Previous Patient Care Experience

Company: _____ ALS Provider: ☐ Yes ☐ No

Address: _____ Supervisor: _____

Job Title: _____ Phone: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?
YES ☐ NO ☐

Company: _____ ALS Provider: ☐ Yes ☐ No

Address: _____ Supervisor: _____

Job Title: _____ Phone: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?
YES ☐ NO ☐

Company: _____ ALS Provider: ☐ Yes ☐ No

Address: _____ Supervisor: _____

Job Title: _____ Phone: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?
YES ☐ NO ☐

7/19/2019I have read and understand all of the preceding questions and statements contained in this document. I understand that CSCC may conduct an investigation into my background to obtain information on my character, general personal characteristics, and criminal record, if any. I hereby authorize CSCC or its representatives to investigate information, statements and/or references provided in this application, without liability arising therefore. I have read understand and agree to all above said statements. By signing this form I am declaring that I have answered all questions truthfully and to the best of my ability.

Print Name: _____

Signature: _____

Date: _____

COLUMBUS STATE
COMMUNITY COLLEGE

SCHOLARSHIPS

Applying for scholarships at Columbus State now takes just a single application.

Now, applying for scholarships at Columbus State is as easy as visiting cscc.edu/scholarships and completing one scholarship application. When you submit your scholarship application, Columbus State will:

- Review your scholarship application and match you with all Columbus State scholarships for which you meet the criteria.

- Forward your scholarship application to appropriate scholarship review committees.

- Alert you if additional information is needed for specific scholarships.

- Notify you of scholarships that you have been rewarded!

*Visit cscc.edu/scholarships today to fill out your scholarship application early. Many scholarships have limited funds and are awarded to the first qualified applicants. *

Why We Use AcademicWorks

- Easier for student and financial aid office

- Cut down on many man hours and resources

- One-time portal login. Students enter Cougar ID and it populates all the student's general information

- Students will complete a general application that will automatically apply them for all standard scholarships

- Software will identify other scholarship opportunities based on their general information and allow students to take additional steps to apply for others.

- System will allow for students to apply for all eligible scholarships (now they can only apply for up to 4)

- Allows us to have a longer offering time frame

- Ease of review for those reviewing scholarships. Reviewers will be given a temporary login/password to get into system to review and score applications as needed

- Allows us to monitor scholarship funds more readily

- We can contact students via email through AcademicWorks to make award offers, allow students to accept and submit thank you letters. Notify students that didn't receive award.

- Allows for private recommendation letters to be submitted from outside sources

- Will allow for more scholarship offerings if needed.

- Provides a central location for all institutional and external scholarship opportunities.

- **Much quicker** turnaround time on scholarship recipient selection

Besides the basic Scholarships and Financial Aid opportunities, EMS specific students may be able to apply for the following two scholarships.

John M. McCormac Memorial Scholarship in

Emergency Medical Services

Criteria

- Have passed the pretest and been accepted into Columbus State's Paramedic Certification Program. The recipient must be a first semester paramedic class applicant.

- Maintain a minimum 3.0 GPA in the paramedic program during the time he or she is receiving the scholarship.

- If your employer reimburses you greater than 75%, you are not eligible for this scholarship. Please submit a letter from your employer which verifies their tuition reimbursement policy.

- Financial need may be considered.

- Submit a resume.

Eligible Majors

EMS AAS (Paramedic Major)

Paramedic Certificate

Award Amounts

$1000.00

Payment is distributed in equal amounts over three semesters. For example, a student who receives a $1000.00 scholarship will receive $334.00 the first semester and then $333.00 each of the two subsequent semesters as long as they maintain a 3.0 GPA.