



Paramedic Program Application Acknowledgment

Name: _____

You were provided a copy of the REMSA Center for Prehospital Education Student Handbook and information on the Paramedic Profession. These documents outline the details of the REMSA paramedic education program and provide a detailed overview of the expectations of students enrolled in the program.

Every prospective student must read, understand, and acknowledge receipt of these manuals prior to being accepted into the program. Students will be held accountable for all information presented in the handbook and the profession information. Students and prospective students have access to program staff for questions and answers.

The following documents were provided as part of the entire REMSA Paramedic Education Program application packet:

- REMSA Center for Prehospital Education Student Handbook
- Paramedic Profession Overview and Minimum Requirements

I understand that it is my responsibility to ensure that I have received the above referenced documents and that I am responsible to read through each document. I further understand that I am responsible to abide by and adhere to the material presented in the documents and that I may have questions answered or clarified by contacting the program coordinator. Submission of an application does not guarantee placement into the course. REMSA reserves the right to cancel any planned course due to low enrollment up to one week prior to the published start date of the course.

I also understand and agree to the following and acknowledge by initial each statement:

_____ I hereby certify that all statements made on or in connection with this application are true to the best of my knowledge and belief. I understand and agree that any false statement or omission of material fact may disqualify me from consideration for acceptance to the REMSA Paramedic Program. Additionally, I authorize the program to verify the statements made on or in connection with this application.

_____ I also certify that I have received a copy of the application packet that contains rules, regulations, course completion requirements, profession information, and the costs associated with the program.

_____ It is the responsibility of the applicant to ensure all required documents have been submitted with this application. Failure to submit all required documentation including transcripts will result in the candidate not being considered for the program.

Student Signature

Date

Additional Program Fees Acknowledgement

Read and initial each item below as an indication that you fully understand and accept these additional required fees and items:

Required Fees:

_____ I agree, that I will pay for all fees associated with the REMSA required entrance exam.

Deadline: Must be completed prior to the first day of class.

Entrance Exam Fee: \$50.00

_____ I agree, that once accepted, I will complete and pay for all fees associated with a criminal background check through the current approved REMSA vendor in order to enter the program. This requirement is mandatory, and no substitutions will be allowed. The rate below is an average and may increase based on the counties you have lived in.

Deadline: Must be completed prior to the first day of the program.

Standard criminal background investigation rate: \$59.95

_____ I agree, that once accepted, I will complete and pay for all fees associated with a drug screening through the current approved REMSA vendor in order to enter the program. This requirement is mandatory, and no substitutions will be allowed. The rate below is an average.

Deadline: Must be completed prior to entering clinical internships.

Standard Drug Screening rate: \$46.00

_____ I agree, that once accepted, I will pay for all fees associated with the REMSA required uniform. Students must purchase the minimum items required to complete the uniform. Additional items may be purchased at the student's discretion. This requirement is mandatory, and no substitutions will be allowed.

Deadline: Must be purchased prior to the first day of class.

Standard new student uniform package: \$170.97

_____ Mandatory \$1,500 internship fee due at REMSA or subject to fees at partnering agencies if in the Fire Cohort.

_____ I agree, that once accepted and have successfully completed the course, I will pay for all fees associated with taking National Registry cognitive testing. These fees are set by National Registry and paid directly to National Registry.

Deadline: Must be purchased prior to the last week of class.

National Registry Cognitive Exam Fee: \$110.00 (or current published National Registry fee)

_____ I agree, that once accepted, I will pay for all the REMSA required course textbooks. ISBN numbers will be provided once accepted into the program and students may purchase from the provided links or a seller of the student's choice. This requirement is mandatory, and no exceptions will be made, the ISBN number must match the list provided.

Estimate of Cost for 8 Required Textbooks: \$824.42

Additional Requirements and Fees:

_____ I understand that, once accepted, I may wish to purchase additional books, study aids, or workbooks to assist in my education. I understand that these items are not required and that the purchase of these materials above and beyond what is provided in class is my responsibility.

_____ I understand, that once accepted, additional supplies and equipment will be required, to be successful in this program including but not limited to a stethoscope. I understand that it is my responsibility to secure these items and I am financially responsible for any costs associated with obtaining them.

_____ I understand, that once accepted, replacement costs for reissuing certifications that have been lost or misplaced after being issued to me will be my responsibility. This includes replacement certification cards as well as continuing education certificates.

_____ **I have received, read, and fully understand this fee addendum to the enrollment agreement.**

Student Signature

Date