



**EMERGENCY MEDICAL TECHNICIAN—BASIC  
EMT—B APPLICATION FOR ADMISSION**



Date of Application: \_\_\_\_\_  
Indicate Course Number of the class you are taking: \_\_\_\_\_  
(Tues/Thurs evenings or Friday all day)

**Biographical Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Employment Information:**

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Telephone: (\_\_\_\_\_) \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please submit a full description of the offense, copies of relevant court documents, disposition, and current status with this application.

**In case of emergency, notify:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

**Educational Information:**

Highest Educational Level Achieved: (check one)

\_\_\_\_ G.E.D. Location: \_\_\_\_\_

\_\_\_\_ Completed High School: Name of School & Location \_\_\_\_\_

\_\_\_\_ College:

Name of college and location: \_\_\_\_\_

Degree: (Y) (N) If yes, give name: \_\_\_\_\_

If no, list number of semester hours: \_\_\_\_\_

**List all previous medical training:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

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

Enclose with this application:

Copy of current certification in BLS/CPR

Copy of GED or high school diploma.

Send application and support materials to:

EMT-B Application

The Career Center

Professional & Community Education

4203 S. Providence Rd.

Columbia, MO 65203

**For questions and further information call 573-214-3803.**