



Emergency Medical Technician/Primary Care Paramedic (EMT/PCP) Program Application Package

Application Recommendations

Your Application

- Time sensitive documents must meet the time requirements listed. For example, the medical report has to be completed within the past six months.
- Documents that require a signature must be signed.
- Review your application checklist to ensure that you are submitting all required documents.
- An incomplete application will only be partially processed. An interview will not be scheduled until a complete application is received.
- Submit your complete application to ESA by the application deadline.

Competition

The application process for the EMT/PCP Program is a competition. You will be advised by telephone, email or letter of the schedule for your interview and EMR level theory exam.

ESA accepts a maximum of 24 students for each EMT/PCP Program.

Prepare for the competition:

- Prepare yourself for a job interview. You will be asked such questions as:
 - What are your strong points? What are your weak points?
 - What makes you feel that you would be a good EMT?
 - Why are you interested in emergency medical training?
 - How do you deal with stress?

Dress for the interview. Be clean and well groomed. A first impression does make a lasting impression.

Study for the EMR exam. Take an EMR Refresher Course if needed.

Go to a local EMS service. Talk to EMRs, EMTs and EMT-Ps. Ask questions. Ask for suggestions for success in the competition.

If you have any further questions, please call ESA at 780.416.8822.



Emergency Medical Technician/Primary care Paramedic (EMT/PCP) Application Checklist

Applicant

Surname

First Name

Middle Name

- Email address. Free email is available on Google (gmail) and Hotmail. Correspondence between ESA and students will be sent by email.
- Application form including non-refundable application fee of \$100.00
- Proof of age (minimum 18 years)
- Transcripts of Grade 12 High School Diploma/GED/equivalent or post secondary education*
- Driver's License (minimum Class 5)*
- CPR - Heart & Stroke Health Care Provider Level C, St. John's Ambulance Level B, or equivalent -- dated within one year, current on first day of EMT*
- EMR Transcripts and EMR Certificate*
- Registered EMR with the Alberta College of Paramedics OR EMR temporary ACP number and proof of registration for the next ACP examination*
- Current Alberta Driver's Abstract* - dated within 3 months of program commencement; maximum 6 demerits
- Security Clearance (Original) from your local policing agency (e.g. city police or RCMP detachment) - dated within 6 months of program commencement confirming that a search based on your name and birth date showed a clear record with no criminal convictions. If your security clearance is dated over 6 months, submit a written and signed confirmation stating that you have not been convicted of an offence since the date of your clearance letter.
- Signed copy of the ESA EMT Program Graduate Report
- Medical Exam Form signed by physician (Original) - dated within 6 months of program commencement
- Updated immunization records including proof of vaccination against measles, mumps, rubella (MMR), Hepatitis B, tetanus and mantoux (tuberculosis) screening*
- EMT Program Graduate Report - signed indicating information was received and read
- Written Assignment Interview Form -- signed by the EMT or EMT-P who was interviewed
- Completed EMS Industry Research Assignments
- Resume
- Two letters of character reference

**** Please include photocopies of these documents as part of your application.***

All documents submitted become the property of ESA and will not be returned to the applicant.

Applicants with a diagnosed learning disability must provide appropriate documentation as part of their application.

Please forward your completed Application for Admission, \$100.00 application fee,
this completed checklist page and supporting documents to:

**Emergency Services Academy Ltd.
2nd Floor, 161 Broadway Boulevard
Sherwood Park AB T8H 2A8**



EMT Program Graduate Report Based on Statistics Reported to Private Institutions, Alberta Adult Education, 2009

School: Emergency Services Academy Ltd.

Licensed Program: Emergency Medical Technician

Report Date: 15-Apr-09

Reporting Period: April 1, 2008 to March 31, 2009

1. Graduation Rate: 92.1% (of the students enrolled, successfully completed)

2. Job Placement Information:

# of Graduates in full time training related employment	28
# of Graduates in part time training related employment	8
# of Graduates in non- training related employment	1
# of Graduates unemployed	1
# of Graduates continuing to higher education	2
# of Graduates in special circumstances precluding job search	0
# of Graduates school was unable to locate	2

TOTAL Graduates 42

Job Placement Rate 90.0%

Job Placement Rate for Advertising Purposes 94.7%

I, _____, confirm that this graduate report was made available to me prior to enrollment.

Student's Signature

Date



**Emergency Medical Technician/Primary Care Paramedic (EMT/PCP)
Applicant Medical Examination Form**

Name: _____ Date of Birth: _____

Address: _____

A. Medical History

Medical Condition (1 = Never / 2 = Past / 3 = Current)	1	2	3
Psychiatric / Mental Disorders			
Alcohol / Drug Addiction			
Neurological Diseases			
Diseases of the Senses			
Chronic Respiratory Diseases			
Diabetes Mellitus			
Permanent Clinical Impairment			
Other Significant Illness			

To your knowledge, is this patient taking any drugs that will cause impairment? Yes No

What is this patient's fitness level? High Medium Low

B. Physical Examination (Y = Yes / N = No)

Is there any abnormality of:

Hearing (Conversation)		
Central Nervous System		
Coordination / Muscle Control		
Spine		
Neck and Extremities		
Heart		
Vascular System		
Respiratory System		
Abdomen		
Hematopoietic System		
Urine		
Blood Pressure		
Other Significant Illnesses		



C. Physician's Statement

To the best of my knowledge, this applicant can perform the duties of an Emergency Medical Technician/ Primary Care Paramedic. There are no medical or physical conditions that will inhibit this EMT/PCP Applicant from:

- Lifting and carrying, with a partner, a stretcher loaded to 75 kg
- Maneuvering in a confined space
- Operating an emergency vehicle
- Managing stressful and traumatic situations

Date of Medical Examination (MM/DD/YY):
Physician's Name:
Physician's Address:
Physician's Signature:

D. EMT/PCP Applicant's Statement

I certify that the information reflected in this report is correct to the best of my knowledge. I authorize the release of this information and any further medical data not stated hereon that an examining physician may wish to submit for the confidential use by the Program Medical Director and / or the Registrar of Emergency Services Academy Ltd.

EMT/PCP Applicant's Signature

Date



Emergency Medical Technician/Primary Care Paramedic (EMT/PCP) Applicant Assignment

The following written assignment, which includes two essays, must be completed by all individuals applying for the Emergency Medical Technician/Primary Care Paramedic Program at Emergency Services Academy Ltd. This exercise is designed to ensure that applicants research the emergency services industry prior to applying for the program.

Part I – Interview and Essay

1. Interview an Emergency Medical Technician/Primary Care Paramedic (EMT/PCP) or Paramedic (EMT-P) who is currently practicing in the field.
2. Base your interview on the questions listed below and submit an essay summarizing the results of your interview.
 - What are the roles and responsibilities of an EMT/PCP?
 - What are the daily routines of an EMT/PCP (medical and non-medical)?
 - What types of hours of work or shift schedules should be expected?
 - What are the career opportunities for an EMT/PCP?
 - What is the typical starting salary for a graduate EMT/PCP?
 - What type of stress should be expected with this kind of job?
 - How are urban and rural services different in each of the above areas?
 - Are all ambulance services the same?
 - What are the similarities and differences between an EMR, EMT/PCP, and an EMT-P? (Compare education, training, scope of practice, responsibilities, etc.)
 - What is the Alberta College of Paramedics (ACP)?

Please have the EMT/PCP or EMT-P whom you have interviewed complete the following information:

Name: _____ ACP Registration No.: _____

Signature: _____ Date: _____

The above name and signature are to ensure the exercise was completed and will not be used for any other purpose beyond supporting an application to ESA. On behalf of Emergency Services Academy Ltd., thank you for taking time to assist this applicant.

Part II – Personal Response

Write a second essay on what character assets you will bring to the EMT/PCP Program and to your career as an emergency services professional. Be as specific as possible.

Both essays and this form must accompany your application for admission.