Application Package – Emergency Medical Responder

Submit to:

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

Questions? Call 780-416-8822 or e-mail info@ESAcanada.com

ESA. THE BEST ARE READY.

Emergency Medical Responder (EMR)
Application Package

This application package for EMR reflects changes required by the Alberta College of Paramedics regarding entry requirements, program length, program revisions and a driving component.

Details are listed on our website: www.ESAcanada.com.

Please ensure you read all of the instructions carefully before submitting your application for an EMR Program. All sections of the application must be completed.

If you are applying as a **mature student,** please request a Mature Student Application from info@ESAcanada.com before submitting a complete application.

All documents submitted become the property of ESA. If you are accepted into the program, original documents will not be returned to you; if you are not accepted, you may request the return of your application and ESA will keep a copy on file.

Please forward your complete application, the completed checklist page, supporting documents (including Alberta Enrolment Contract which is a separate download from the website) and payment to:

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

Acceptance into an EMR Program

You will be advised by email of your acceptance into an EMR Program at ESA pending the receipt of a complete and acceptable application by ESA. Program maximum is 24 students. If the program you apply for is fully registered, you will be offered the opportunity to apply for an alternate EMR Program.

Questions? Call 780-416-8822 or e-mail info@ESAcanada.com

Submit your complete application by:

>   **E-mail to info@ESAcanada.com**

>   **Fax to 780-449-4787, or**

>   **Mail, courier or deliver it in person to:**

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

ESA Use Only

Date application received: _____   Date application processed, fee paid: _____

Date email sent to applicant: _____   Processed by: _____   EMR APP 2020/09 - V3.9

Emergency Medical Responder (EMR) Program
Application Checklist

Include this page with your application.

Applicant: _____

            Last Name   First Name   Middle Name

Course Code: _____

ESA Use	Student Checklist
☐	☐ Have you completed the Waiver and Consent Forms?
☐	☐ Have you completed the EMR Application Form?
☐	☐ Have you completed and signed the Alberta Student Enrolment Contract. This contract is a separate download from the ESA website. Details for completing this contract follow.
	Have you included the following with your application?
☐	☐ A. **Driver's License - Minimum age 18. Class 5 minimum** (include photocopy).
☐	☐ B. **Education** - Transcripts of Grade 12 High School Diploma/GED/equivalent or post secondary education (include photocopies). Transcripts must include: ☐ English 30 or ☐ Equivalent English 30-1, 30-2 ☐ Math 10 or ☐ Equivalent Math 20-1, 20-1 ☐ Biology 30 or ☐ Equivalent ☐ or pre-approval from ESA for application as a mature student. Please contact ESA for a Mature Student Application Form. Contact info@ESAcanada.com.
☐	☐ C. **CPR- BLS Provider or CPR Level C or Health Care Provider.** Dated within one year as of the first day of the program. (include photocopy)
☐	☐ D. **Standard First Aid Certificate.** Dated within three years as of the first day of the program (include photocopy).
☐	☐ E. **Driving Component (Corequisite)- Proof of registration for the Ambulance Paramedicine Driver Operator Course (APDOC) or a certificate of successful completion dated within 6 months as of the first day of the program.** (include photocopy) Refer to the ESA website for appropriate APDOC providers.
☐	F. Do you require Special Academic Accommodations? ☐ Yes ☐ No If yes, you must submit the required documentation with your application package. Refer to our website: https://www.esacanada.com/student-services#academic-accommodation

Mature Students

Mature Students may be accepted into an Emergency Medical Responder Program at ESA.

If you do not meet the education requirements (Transcripts of Grade 12 High School Diploma/ GED/ equivalent or post-secondary education including English 30, Math 10 and Biology 30), complete a Mature Student Application available from info@ESAcanada.com.

Forward the application to info@ESAcanada.com for review by the Registrar. You will be advised if you may proceed with an application to an EMR Program as a mature student.

ESA•EMR

Emergency Medical Responder (EMR) Program
Alberta Student Enrolment Contract

The Alberta Student Enrolment Contract is a form required by the Private Career Colleges Branch, Alberta Advanced Education.

Please review the contract before completing and signing it.

Your computer program may allow you to use this as a fillable pdf. You will need to click on some of the fields as the tabbing between fields does not always work.

Do not change any of the information preloaded by ESA.

EMR Course Code	Delivery Mode	Orientation Date of Session	End Date of Session
2020 EMR Programs			
EMR 2020-12	Full Time	December 15, 2020	January 29, 2020
2021 EMR Programs			
EMR 2021-02B	Part Time	February 9, 2021	May 16, 2021
EMR 2021-04	Full Time	April 6, 2021	May 21, 2021
EMR 2021-06	Full Time	June 15, 2021	July 30, 2021
EMR 2021-08	Full Time	August 24, 2021	October 8, 2021
EMR 2021-10	Full Time	October 19, 2021	December 3, 2021

If you add information to the Enrolment Contract, please print the form before closing. It will not save the information you added.

If you submit your application by fax or email, please mail or deliver an **original contract** (with original signatures) to ESA. The original contract with your original signature is needed before you can attend classes.

* ESA program dates and fees are subject to change.

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Emergency Medical Responder (EMR) Program
Student Waiver/Consent Forms

☐   I, _____, understand that I may be required to perform invasive procedures on classmates during the didactic portion of the EMR Program. I may also be required to allow classmates to perform invasive procedures on me.

An invasive procedure is one that penetrates or breaks the skin or enters a body cavity. Examples of invasive procedures performed in the EMR Program include testing Blood Glucose Levels. Risks include but are not limited to; needle stick injuries, bruising and pain.

Please initial the above box to show that you understand and consent to the above invasive procedures.

Applicant's signature: _____ Date: _____

Consent may be withdrawn at any time.

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**Emergency Medical Responder (EMR) Program
Student Waiver/Consent Forms**

I, _____, understand that in order **to work** as an EMR in **Alberta**, I will be required to:

☐   write an examination and register with the Alberta College of Paramedics (ACP);

☐   provide a security clearance;

☐   provide proof of all required immunizations;

☐   hold a class 5 driver's license, GDL removed;

☐   maintain annual CPR certification.

I, _____, understand that in order **to work** as an EMR in **Alberta**, I may need to:

☐   provide a copy of a Grade 12 High School Diploma or GED to an employer;

☐   I, _____, understand that the Driving Component (Corequisite) or **Ambulance Paramedicine Driver Operator Course (APDOC)** is required by the Alberta College of Paramedics, as part of EMR certification.

    ☐   The Alberta Paramedicine Driver Operator Course (APDOC) is currently offered by a few providers in Alberta, as listed on www.ESAcanada.com under Program Details and Additional Expenses. The student will be responsible for registration and payment of all driving component fees to the provider.

    ☐   EMR students must successfully complete APDOC, an ACP approved, 40 hour professional driving course before coming to ESA or within 6 months of the first day of the ESA EMR Program in order to receive an EMR Program Certificate and Transcript from ESA. ESA recommends that the APDOC class be taken in advance of coming to ESA.

Please initial each of the boxes on this page to show that you understand and agree with each of the requirements.

Applicant's signature: _____ Date: _____

Emergency Medical Responder (EMR)
Student Waiver/Consent Forms

EMR Equipment Requirements

I, _____, understand that there is equipment required beyond that supplied by ESA and additional fees beyond the fees paid to ESA, as follows:

Required Equipment - Students are required to have the following equipment and supplies for the EMR program at ESA:

☐   Access to a Computer - EMR students must have access to a computer before the program for pre-study and during the EMR program for assignments, chapter review and chapter quizzes.

       A webcam may be required for online theory classes.

       A computer is not required in class although a tablet such as an iPad or a laptop is optional and permitted.

☐   Stethoscope - Littman Classic III recommended. Lower priced stethoscopes are acceptable.

☐   Safety glasses

Optional Equipment:

☐   A watch

☐   A mini maglight

☐   Universal shears

Post Graduate Costs

I, _____, understand that there are additional fees required in order to be employed as an EMR. These fees are not paid to ESA.

☐   Registration and examination fees are paid to provincial registration bodies. In Alberta, fees are paid to the Alberta College of Paramedics (ACP). Fees as of 2019 total $1,425.00:

       ACP Application Fee   **$100.00**

       ACP EMR Exam Fee   **$800.00**

       ACP Annual Registration Fee   **$525.00**

Please initial each of the boxes on this page to show that you understand and agree with the additional equipment requirements/options and post graduate costs.

Applicant's signature: _____ Date: _____

EMERGENCY SERVICES ACADEMY LTD.

Emergency Medical Responder (EMR)
EMR Program Graduate Report
Based on Report from Private Vocational Training, Alberta Innovation and Advanced Education

Graduate Report

Reporting Period: April 1, 2018 - March 31, 2019
Date Prepared: April 29, 2019

Institution: **Emergency Services Academy Ltd.**
Licensed Program: **Emergency Medical Responder**

1. Graduation Rate: 73.53% (of the students enrolled, successfully completed)

2. Job Placement Information of Graduates:

- in full time training related employment	10
- in part time training related employment	12
- in not training related employment	56
- unemployed	1
- continuing to higher education	74
- in special circumstances	2
- unable to locate student	3
Total Job Placement	**22**

3. Job Placement Rate: 27.85%

Please note:

EMR is typically used as a prerequisite for Higher Education rather than employment.

This graduate report was made available to me prior to enrollment.

_____   _____   _____

Applicant's Name (please print)   Signature   Date

Emergency Medical Responder (EMR)
Application Form - Page One

Personal Information

Last Name   First Name (Legal)   Middle Name

Former Surname   Also Known As   Date of Birth (YYYYMMDD)

Gender ☐ Male ☐ Female ☐ Unspecified   Tshirt Size ☐ XS ☐ S ☐ M ☐ L ☐ XL

Alberta Student Number   Social Insurance Number (SIN)

Phone Number (Home)   Phone Number (Cell)   Email Address - Mandatory

Mailing Address (Street/Avenue/Box Number)

City   Province   Postal Code

Emergency Contact Person   Relationship   Telephone

How did you learn about ESA? ☐ Internet search ☐ Social Media ☐ Knew ESA website ☐ ESA Information Session
☐ Referral from a friend/neighbor/someone working in emergency response ☐ Referral from a former or current ESA student
☐ Radio ☐ Printed advertisement ☐ Other

Please provide details of how you learned about ESA. If a referral from a former or current ESA student, please provide their full name so we can follow up with a thank you:

_____

_____

Registration Information

Program: **Emergency Medical Responder**

Please list the following information for the session you want to take. Refer to www.ESAcanada.com to confirm current Course Code and Dates.

Course Code: _____ **Start Date:** _____ **End Date:** _____

EMERGENCY SERVICES ACADEMY LTD.

Emergency Medical Responder (EMR)
Application Form - Page Two

Payment

Are you being sponsored for this program by a business or organization?

☐ Yes ☐ No If Yes, please provide details, including a contact name and email address:

_____

_____

Application and tuition fees are payable to Emergency Services Academy Ltd., and are subject to change. To confirm current fees, please check our website www.ESAcanada.com or call (780) 416-8822.

Include a first payment with this application:

EMR 2020-12 through EMR 2021-10:   Payment of $1,095.00 which covers Administration Fee ($125.00) + Program Materials Fee ($470.00) + Registration Fee ($500.00 credited to tuition).

Second payment of $1,900.00 is due on the first day of classes at ESA.

This payment covers the balance of Tuition Fees ($1,900.00). You will receive an invoice for this payment.

The 2 Payments are payable to ESA and do NOT include fees for the driving component of the EMR Program.

Method of Payment:

☐ Cash   ☐ Cheque/Money Order   ☐ Debit   ☐ e-Transfer   ☐ VISA   ☐ MasterCard   ☐ American Express

For Credit Card Use: __|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| _____
                                      Card Number (will not be kept on file by ESA)   Expiry Date (MMYY)

Name of Cardholder: _____ Cardholder's Signature: _____

For INTERAC e-Transfer: Set up the e-transfer through your bank using the ESA email address: e-transfers@ESAcanada.com. e-Transfers to ESA are automatic deposit.

Declaration

I hereby certify that all statements on this application are true and complete in all respects and no relevant information has been withheld. If accepted for the above program, I agree to comply with all rules and regulations of **Emergency Services Academy Ltd.**

_____   _____
Applicant's Signature   **Date**

The collection of this personal information is necessary for operating and administering the services of the ESA Registry.
All personal information will be protected under the provisions of the Alberta Freedom of Information and Protection of Privacy Act.