



EMORY UNIVERSITY EMS
EEMS RECRUIT:
EMT TRAINING APPLICATION 2011-2012

ALL FIELDS ARE REQUIRED.

Please complete the following form to the best of your knowledge. Use blue or black ink.

Name _____
Last First Middle

Parent/Guardian Name (if under 18) _____

Permanent Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Emory P.O. Box _____ Emory Student/Employee ID# _____

Date of Birth _____ Social Security Number _____

Primary E-mail Address _____

Emergency Contact Name & Number _____

YES NO Are you alcohol or drug dependant?

YES NO Have you ever been convicted in any court of a felony or other criminal offense, or do you have any criminal offense pending? (If yes, attach an explanation)

YES NO Are you an Emory undergraduate?

If yes, circle your standing for the 2011-2012 academic year. **Freshman / Sophomore / Junior / Senior**

If no, how are you affiliated with Emory University? _____

As a student in the Emory EMT course, you will be considered an "EEMS Recruit." The purpose of this EMT course is to prepare our program graduates to be contributing members of Emory EMS (EEMS). As an Emory EMT student, you will be required to participate in certain EEMS activities, and upon completion of the EMT course, it is expected you will volunteer for EEMS for a minimum of one year. For more information, go to www.emory.edu/EEMS.

In order to complete the application process, you may be asked to interview with members of the Emory EMS command staff. You will be contacted with further information following submission and review of this application.

I do, by my signature, certify that the information in this application is true and correct to the best of my knowledge. I understand that willfully supplying false information is sufficient cause for rejection of my application or removal from the course.

Signature _____ Date _____

Parent/Guardian Signature (if under 18) _____ Date _____

Send or bring completed application to:
Emory EMS
Attn: 2011 EMT Course Application
1784 N. Decatur Rd., Suite G-01
Atlanta, GA 30322-0550

For more information email:
EMTClassQuestions@learnlink.emory.edu
Or visit our website at:
www.emory.edu/EEMS

APPLICATION DEADLINE: AUGUST 5, 2011 AT 5:00 PM.
APPLICATION DEADLINE IS FINAL.

To be considered for admission, applications **must** include all of the following:

→ **1. Legible copies of:**

- (a) **High School Diploma** (or equivalent)
- (b) **Immunization records.** Fill in the blanks AND attach documentation of the following:
- Hepatitis B (First dose required)
Dose 1 Date ___/___/___ (required)
Dose 2 Date ___/___/___
Dose 3 Date ___/___/___
- MMR: *Measles/Mumps/Rubella* (Both doses required)
Dose 1 Date ___/___/___
Dose 2 Date ___/___/___
- Chicken Pox (Documentation Required)
Do you have a history of this disease? __Yes__ No
If Yes: Date (Month/Year) ___/___
If No: Known serologic immunity __Yes__ No
or Vaccine received Dose 1 Date ___/___/___ (Both doses required)
Dose 2 Date ___/___/___

→ **2. Typed responses to the following questions on a separate sheet of paper.** (Note: All responses must fit into 2 pages typed, single-spaced)

- (a) As previously mentioned on the application, the purpose of the EMT course is to prepare program graduates to volunteer for Emory EMS. What is the reason you want to join our organization?
- (b) What unique personal characteristics or experiences do you have that will make you a successful, contributing member of Emory EMS?
- (c) List and describe your current or recent volunteer activities.
- (d) List any school, extracurricular, or work-related awards, honors, or commendations received.
- (e) Of your current or recent commitments, awards, or honors (work, school, community, etc.), which one are you most proud of and why?
- (f) This course consists of more than 300 hours of class time and clinical rotations. Given your anticipated time commitments for the 2011-2012 academic year, how do you plan to keep up with the accelerated pace and challenging material of the EMT course?

→ **3. Non-Refundable \$30 application fee.**

****MONEY ORDERS ONLY**** Payable to: Emory University Police Department.
****Personal Checks and Cash will NOT be accepted****