Jackson State
COMMUNITY COLLEGE
SCHOOL OF HEALTHCARE PROFESSIONS

EMT Program Application

Application Date: _____ **Campus Preference:** _____

Program: Basic EMT ☐ Advanced EMT ☐ **Semester:** Fall ☐ Spring ☐

I. Applicant Information (please type or print legibly):

Name: _____ **J# if Known:**

City & State of Residence: _____ **Phone:** _____

Frequently Checked Email: _____

II. Registration Information:

1. Have you applied, and been accepted to, Jackson State Community College? _____
2. Are you **currently** enrolled as a Jackson State Community College Student? _____

III. Basic EMT Applicants ONLY:

1. Are you currently, or have you ever been, a licensed EMR in Tennessee? _____
2. Have you attended, or completed, EMT training anywhere? _____
3. Would you prefer **Day Classes,** or **Night Classes?** _____

IV. Advanced EMT Applicants ONLY:

1. Are you currently licensed as an EMT in Tennessee? _____
2. Date & location where you completed EMT Class: _____

Students accepted into any EMT program are required undergo a criminal background investigation and perform a urine drug screening the student's expense. A positive result may prevent the student from clinical placement and program completion. Students are also required to provide proof of their immunization history and/or obtain the proper immunizations at their own expense. Attendance is required at a class/program orientation in order to obtain information and documents to help ensure student success within the program. This orientation may occur during the first day of class; students will be notified of orientation date(s) and times(s.) Students who do not attend this mandatory orientation will NOT be permitted to attend classes.

I have read and understand the above. By signing below, I understand that providing false or misleading information can disqualify me from being accepted into any EMT program:

Applicant Signature: _____

Return Application to: Jen Jakubowski, Enrollment Coordinator for the School of Healthcare Professions

- Email: jjakubowski@jscc.edu OR
- In-Person: Nursing Building, 2nd Floor, Rm. 243

Mail: Jackson State Community College
Attn: Jen Jakubowski
2046 North Parkway
Jackson, TN 38301

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