



## Building A Strong Foundation For Your EMS Future

### Paramedic Program

Dear Student:

Thank you for requesting additional information about the EMS Academy Paramedic Program. Headquartered in Marshfield, MA, EMS Academy is proud to offer EMT Training in Marshfield, Quincy (EMT and Paramedic), and Woburn. The primary objective of our Paramedic Program is to provide exceptional training with state-of-the-art teaching materials combined with classroom environments and skills labs that are comfortable and conducive to learning. Our goal is to help you achieve your goal of becoming a Paramedic.

EMS Academy Instructors have been teaching in DPH OEMS approved Basic and Advanced level EMT and Paramedic Courses and Programs since 1993. EMS Academy Instructors have had great success with our EMT Basic Program as revealed by our nearly 100% pass rate. This success is both within our program's curriculum and during State OEMS testing. The EMS Academy and its Instructors strive to be as successful with our Paramedic Program.

Our Instructors have both field and educational experience from some of the most active 911 EMS systems and hospitals in Massachusetts. Their combined experience consists of decades of experience in hospital-based EMS, private ambulance industry, and fire-based services. Instructors will teach not only the core curriculum, but also bring their pre-hospital field knowledge, skills and experiences to the classroom and to field components and training. Coming from Boston EMS, Northeastern University, and Fire Department and EMS Agencies, our Instructors are professional educators who are dedicated solely to the EMS profession (including having recognition as "EMS Educator of the Year").

Enclosed please find the application package you requested. Please review all documents and return them to EMS Academy with your deposit as soon as possible to secure your seat in the program.

If you are undecided as to why you should choose EMS Academy, here are a few important reasons why:

- EMS Academy is an Accredited Training Agency through the DPH OEMS
- EMS Academy provides an all inclusive program with no hidden costs. Each student will be provided with:
  - Textbooks
  - Anatomy & Physiology, CPR, ACLS and PALS Courses included
  - Clinical, Field, and Extrication Courses
  - Student Access on our Interactive Website includes lectures, study guides, practice quizzes, and practice exams
- Interactive patient simulation labs with an Instructor to student ratio of 1 Instructor per 6 students
- Access is provided for computer lab work, library study, and practical skills application with our computer lab

Come be part of an all inclusive exceptional Paramedic Program and continue to Building a Strong Foundation for Your EMS Future!

**Professionally,**

*Lori A. Joyce*

FF I/II, NREMT-P, I/C

EMS Academy

Phone: 781-834-6911

Cell: 781-724-1911

<http://www.emsacademy.biz>

Created: 11/24/07

Updated: 07/24/2010

Page 1



Start Date: \_\_\_\_\_

Location: \_\_\_\_\_

Day or Night Course: \_\_\_\_\_

**Building a Strong Foundation for Your EMS Future**

**Application for Admission  
Paramedic Program**

**Instructions:** Please type or print neatly in blue or black ink. Upon completion, please return application including applicable deposit (check, credit card or money order) to: EMS Academy, 79 Parking Way, Quincy, MA 02169

*(Please Print)*

**Part A. Personal:**

**First Name** \_\_\_\_\_ **MI** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip code** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_ **Date of Birth (MM-DD-YYYY)** \_\_\_\_\_

**EMAIL ADDRESS – Used for communication during the program** \_\_\_\_\_

**Employer** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip code** \_\_\_\_\_

**Office Phone** \_\_\_\_\_ **Name of Supervisor** \_\_\_\_\_

**Part B. In Case of Emergency – Relationship to you:**

**First Name** \_\_\_\_\_ **MI** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip code** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Part C. Withdrawal:** Must be done in writing sent certified mail. No withdrawals made verbally, by email, or in person will be accepted. Absences from any class will not constitute withdrawal from the program.

## Part D. PROGRAM FEE:

### Fee(s) include:

- |  |                   |
|--|-------------------|
| • Program Tuition  | \$6,900.00        |
| • Application fee; must accompany application and is <b>non refundable</b>   | \$ 100.00         |
| • Text books   | \$ 240.00         |
| • ACLS & PALS Certifications; <b>provided</b> as part program <b>content</b> | \$ 0              |
| • Entrance Exam; <b>includes</b> Math and English                            | \$ 25.00          |
| • Clinical / Field Rotation fee  | \$ 175.00         |
| • CORI Check   | \$ 60.00          |
| • Total cost of program  | <b>\$7,500.00</b> |

### Fee(s) NOT Included:

- |                                    |           |
|------------------------------------|-----------|
| • State Certification Application  | \$ 150.00 |
| • State Certification Written Exam | \$ 55.00  |

## Deposit/Payment Information:

A **\$500.00** deposit is required at the time of application in order to secure a seat in the class. Seats are assigned in the order in which deposits are received. Initial deposits are non-refundable unless approval to participate in the Paramedic Program is denied by EMS Academy.

**Non-financing students:** Balance of **\$ 7,000.00** due on/before the first night of class. *Payment of tuition in full prior to the start of class (cash or check) will result in a **\$500.00** program discount for a total program cost of only **\$7,000.00**.*

**Financing students:** \$2,500.00 (including initial \$500.00) by the first night/day of class and will make monthly payments as indicated below and in separate financing application and agreement.

## Part E. Tuition Financing:

- EMS Academy offers this option to students as a courtesy. Credit checks ARE NOT required to qualify for Tuition Financing.
- I understand that by applying for financing, I agree to all of the following conditions:**
  - A payment of \$500.00 must accompany my application.
  - An additional payment of \$2,000.00 is due on/or before the first night/day of class. Total payments received by the first night of class should equal at least \$2,500.00.
  - Monthly payments must be paid on-time as indicated in financial financial agreement/loan contract.
  - A 3% application fee is required and paid separately to lender (Education Loan Source) upon submitting my application for financing.
  - Delinquent finance payments will result in holding of class grades until payment is made.
  - Approval to finance must be secured prior to the start of class.
  - If I fail to make tuition payments, I will pay all EMS Academy-associated costs incurred in the effort to collect the tuition (including but not limited to bank fees, court costs, attorney fees, lost wages, etc.), whether course was completed or not.

I understand that tuition finance payments must be paid on time and in full prior to participating in any State (practical and/or written) Examination. I further understand that the Paramedic program will not be considered "completed" unless tuition is paid in full. Any applications to the Commonwealth of Massachusetts will be "withheld" until all balance (tuition/fees) are brought current/paid in full.

Initials: \_\_\_\_\_

## Part F. Veterans Benefits

Veterans benefits are available to qualifying students. You must go on [www.gibill.va.gov](http://www.gibill.va.gov) and complete and submit form #22-1990

- Submit an application and fee to EMS Academy prior to submitting their application to the V.A.
- Submit the appropriate documentation to the VA and provide EMS Academy with copies of all documents.
- Applicant must email [lori@emsacademy.biz](mailto:lori@emsacademy.biz) and confirm the date form #22-1990 was submitted.
- EMS Academy will then complete and submit for # 22-1999.
- Make a deposit of not less than \$2,500.00 on or before the first class unless other arrangements have been made.
- Understand that any student using his/her VA benefits will be considered to be a financing student and subject to the same requirements as outlined above as well as the students financing agreement.



# *Immunization Documentation*

**To: Student**

Please submit this document to your medical provider and request him/her to provide all required information. Failure to submit this document with the requested information could prevent your involvement in our EMT-P program.

**DO NOT ATTACH ANY DOCUMENTS.**

**This document will be the only document used to meet your immunizations requirement that we will accept. Please provide writing in black or blue ink pen.**

**To: Medical professional**

The information request below is required by our clinical (hospital) affiliations as a requirement to the student's involvement within the hospital setting. Failure to provide all necessary information will result in the student's removal from the program or prevent the student from completing the program.

Name: Date \_\_\_\_\_ DOB \_\_\_\_\_

**Vaccine Documentation: THIS DOCUMENT MUST BE COMPLETED IN FULL  
DO NOT ATTACH ANY MEDICAL DOCUMENTS, Thank you.**

MMR Date(s) \_\_\_\_\_, \_\_\_\_\_

(PPD) Date \_\_\_\_\_ PPD must have negative result within two weeks from the end date of the program.

Varicella (Chicken Pox): Vaccine or Serological evidence of immunity or past medical record indicating history of illness Date \_\_\_\_\_

Hepatitis B Series:

Dates Doses #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Printed Name or Stamp (MD/PA/NP/RN) \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name or stamp of MD or RN: \_\_\_\_\_

Medical Facility:

Address: State: Zip:

Phone: Fax:

864 Plain St., Suite 4. Marshfield, MA 02050  
(781) 834-6911 – Office, (617) 472-0052 – Fax

# TuitionFlex

## <sup>SM</sup> EMS Academy Students:

This plan makes it easy to pay your tuition and fees in easy, monthly payments by check or credit card!



### TO APPLY

**EMT Basic Students** must first complete the EMS Academy registration form.

**Paramedic Students** must first complete your Paramedic Application Package.

Upon completion of your application form and/or package and initial deposit, you may enroll for the TuitionEase program at:

<https://ems.tuitionservices.com>

### ELIGIBILITY FOR BOTH PROGRAMS

- ✓ U.S. or Canadian resident
- ✓ Currently enrolled at EMS Academy

### TUITIONEASE™ PROGRAM DETAILS

**For EMT Basic Students:** This plan makes it easy to pay your tuition and fees in 3 easy payments by check or credit card!

- ✓ Interest Free
- ✓ Maximum amount financed is \$725.00
- ✓ Online application with e-signature
- ✓ 100% approval
- ✓ One time \$50 application fee
- ✓ No credit check or co-signer required
- ✓ Pay your tuition in 3 easy payments
- ✓ No prepayment penalties

### TUITIONEXTEND™ PROGRAM DETAILS

**For Paramedic Students:** This plan makes it easy to pay your tuition and fees in 18 easy payments by check or credit card!

- ✓ 12% Interest Rate
- ✓ Maximum amount financed is \$5,000.00
- ✓ Online application with e-signature
- ✓ 100% approval
- ✓ 3% application fee
- ✓ No credit check or co-signer required
- ✓ Spread your tuition over 18 monthly payments
- ✓ No prepayment penalties



*Building A Strong Foundation For Your EMS Future*

---

## **Student Health and Accident Insurance Verification of Coverage Form**

I, \_\_\_\_\_ presently have Health and Accident Insurance provided by:

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

I understand that it is my responsibility to maintain health and accident insurance while I am enrolled in all aspects of the EMS Academy Paramedic Program to include the didactic (classroom and lab), clinical, and field internships.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**\*\*Please provide a copy of your Insurance Certificate or Insurance Card (front and back) with this document.**

## **Professional Liability Insurance**

I further understand that as a Paramedic Student I must secure and maintain Paramedic Student Professional Liability Insurance while I am enrolled in all aspects of the EMS Academy Paramedic Program to include the didactic (classroom and lab), clinical, and field internships.

Name of Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**\*\*Please provide a copy of your Insurance Certificate or Insurance Card (front and back) with this document.**

Please contact the following company and/or your personal insurance representative to obtain coverage:

### **Healthcare Providers Service Organization (HPSO)**

159 E. County Line Road  
Hatboro, PA 19040-1218

Phone: 1-800-982-9491

Fax: 1-800-739-8818

[www.hpso.com](http://www.hpso.com)





## *Building A Strong Foundation For Your EMS Future*

---

### **Admission Process**

**Step One:** Submit completed Paramedic Application with appropriate deposit to secure your seat in the class.

**Step Two:** Paramedic Entrance Exam (Multiple Choice) – Scheduled following submission of application and course deposit.

**Step Three:** Entrance Interview with the ALS Director – This may be scheduled separately or occur in conjunction with the Entrance Exam.

**Step Four:** Submit all remaining documentation such as the: Immunization Documentation Form (with appropriate signature), Student Insurance Documentation and Verification Form, and CORI Form (provided to students following application to the course).

**Step Five:** Final Program Approval

**Step Six (Financing Students):** Using the information and link provided within the application package, complete the appropriate finance application (including payment of application fee). *All students are approved for financing (without a credit check or co-signer) provided they have been approved to participate in the EMS Academy Paramedic Program.*

### **Admission Criteria**

In order to be eligible for the EMS Academy Paramedic Program, students must be of good moral character, be committed to continued learning and education, and have a sincere desire to help others in need. In addition students must have (or be able to attain) the following:

1. High School Diploma or GED
2. Current Certification as an EMT-B or EMT-I.
3. Be in good physical health in order to complete all sections of the Paramedic Training Program to include the didactic (lecture and laboratory), clinical, and field internships. (Please see DPH OEMS physical requirements for certification as an EMT for additional details).
4. Proof of Medical Coverage (as indicated within the application)
5. Proof of Professional Liability Coverage (as indicated within the application)
6. Proof of Immunization (as indicated within the application)
7. Completion and submission of all required components of the Paramedic Application to include necessary and/or required deposits, payments, and/or financing documents.

Thank you again for your interest in the EMS Academy Paramedic Program where it is our goal to help you achieve your goal of becoming a Paramedic.