EASTERN OKLAHOMA COUNTY TECHNOLOGY CENTER

FALL 2024 VOLUNTEER INITIATIVE EMT BASIC APPLICATION PACKET

Eastern Oklahoma County Technology Center
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FALL 2024 VOLUNTEER INITIATIVE EMT BASIC APPLICATION PACKET

SCHEDULE and COST INFORMATION

EMT Basic:
- This program includes Basic EMT online curriculum with Saturday Labs
- You must be on a Volunteer Fire Department and provide a letter from the Chief
- Schedule: **Saturday, August 17, 2024 to Saturday, December 14, 2024**
- 265 Clock Hours
- Enrollment is limited to 20
- Tablets/laptops are permitted for use in the classroom by the students
- Estimated out of pocket costs can range between $500 and $800

Pre-Admission and Post-Admission Costs are to be paid directly to outside vendors/agencies and are the responsibility of the student.

EMT Basic Total School Charges:
- *No Tuition fee for Volunteer Firefighters*

Estimated Pre-Admission, Out-of-Pocket Costs:
- Group One Federal Background Check Printed Receipt - $49
- Vaccinations - $0-$300 (from one TB test up to complete immunizations)
- SurScan Random Drug Testing Fee - $40

Estimated Post-Admission, Out-of-Pocket Costs:
- **EMT BASIC TEXTBOOK $377.96**:
  - "Navigate 2 Premier Access for Emergency Care and Transportation of the Sick and Injured, Twelfth Edition", No Workbook {ISBN 9781284249613} FISDAP Included
  - This ISBN is good only if package deal is purchased from http://www2.jblearning.com with EOC's discount code. ***Discount Code will be emailed to you once you have completed your Application Packet and have been enrolled into the class.***
  - Platinum Planner - $33

- **EMT UNIFORMS**:
  - EMT Clinical Polo Shirt - $32
  - *Detailed uniform information will be given during the orientation.*

- **EMT SUPPLIES**:
  - Stethoscope - $30 -- Suggestion: Littman Lightweight II SE from www.amazon.com
  - Pen Light - $6
  - Wrist Watch - $5 (analog style – needs second hand for EMS skills)

Contact Dana Robertson, EMT/Fire Administrative Assistant, in Public Services at (405) 390-5315, or at drobertson@eoctech.edu if you have any questions.

FALL 2024 PACKET APPLICATION
VOLUNTEER INITIATIVE EMT BASIC

Complete the information form below and include it in your packet. Please print.

Name: _____
First   Middle   Last

Address: _____

City: _____ **State:** _____ **ZIP:** _____

Phone Number:(   ) _____ **Date of Birth:** _____

Email Address: _____ **SSN:** _____
*Required for EMS certifications

Gender (optional): _____ Male _____ Female

Race/Ethnicity (optional) - Answer either (A) or (B):

____ **(A)** Hispanic/Latino/Spanish of Any Race   **OR**

____ **(B) Check All That Apply:**
_____ White   _____ Black/African-Amer.;   _____ Amer. Indian/Alaskan Native;   _____ Asian;
_____ Native Hawaiian/Other Pacific Islander;   _____ Unknown;   _____ Nonresident Alien

Highest Education Level you have completed (check one):

_____ H.S. Diploma/GED   _____ Some College   _____ Associate's Degree
_____ Bachelor's Degree   _____ Master's Degree   _____ Doctorate

Which program are you planning to enroll in? (check one)

____ EMT Basic (Volunteer Initiative) – Fall 2024

Fire Department: _____

BE SURE TO READ ALL ENCLOSED PAPERWORK! **See the EMT Application Packet Checklist on Page 2 for details on each requirement that follows. Requirements will be at the applicant's expense. Turn in documents altogether in this packet by the deadline! If this packet is missing ANY of the required paperwork when it is turned in, you will NOT be admitted. Please follow all instructions – VERY IMPORTANT!**

APPLICATION PACKET CHECKLIST FOR EMT BASIC

All of the following documents must be completed and turned in for review by Dana Robertson, in the Public Service Building in person or email all documents to drobertson@eoctech.edu no later than Wednesday, August 7, 2024.

Complete the following:

____   Packet Application Form

____   Group One Federal Background Check Receipt

Go to the following link and follow the instructions:
https://gp1.acciodata.com/cgi-bin/pub/unsolicited_portal?guid=yUYGgc4VK8g13Aj6MTKBv5f2F6nfxo8H
Continue through the prompts until request is complete. You will pay by credit card online. You **MUST** include a copy of your receipt in your packet. You will NOT receive the results of this background check. They will be sent directly to EOC Technology Center.

____   SurScan Random Drug Testing Fee Receipt

Go to www.SurScan.com . Click on **REGISTER** and enter client code **EOKC**. Follow the directions carefully. Program Selection is EMS. **The fee is $40.00**, you will need to provide a copy of your receipt with your enrollment packet.

____   Copies (No Originals) of Required Vaccination Records

____   Hepatitis B Vaccination Declination Form (if student does not have the HEP B Vaccinations)

____   Letter from your Chief stating that you are a Volunteer Fire Fighter and in good standing at your department

 *It is mandatory that you are in attendance for Orientation. Please be prepared to purchase your EOC Tech polo at this time.

VACCINATION RECORDS

COPIES (NO ORIGINALS!) of all required vaccination records must be included in packet to be returned to EOC Tech. We are not responsible for any original vaccination records you include in this packet.

- If any required vaccination record is not included, the paperwork in your packet **will be considered incomplete and you will be removed from the admission process**.

Required Vaccinations:

- **Three (3) Hepatitis B shot series OR Titer OR sign a Hepatitis B Waiver.** NOTE: Sign the following waiver ONLY if you are unable to provide proof of having Hepatitis B Vaccinations or a Titer.
- **Two (2) MMR vaccines or Titer**
- **Two (2) Varicella Vaccinations** or **Varicella Titer.** A history alone of Varicella (Chicken Pox) is **NOT** acceptable.
- **Tetanus booster** within the last 10 years.
- **Flu shot** – for this class it will be the **Fall 2024 vaccination when it becomes available.**
- **TB (Tuberculosis) –** 1 IGRA Blood Test within the last 12 months
    - or 2 skin tests (7 days apart)

Currently the COVID vaccination is not required to attend EOC's EMT Academy, however if you have the vaccination you can provide a copy with your vaccinations listed above.

Contact Dana Robertson, EMT/Fire Administrative Assistant, in Public Services at (405) 390-5315, if you have any questions about the vaccination requirements listed above.

EASTERN OKLAHOMA COUNTY TECHNOLOGY CENTER
HEPATITIS VACCINATION DECLINATION FORM

Sign this waiver only if you have not completed the three shot series or do not desire to take the Hepatitis B vaccine.

The Hepatitis B Virus (HBV) is a serious and dangerous disease and may be contracted through the contact of blood, blood products, and other potentially infectious material.

EOCTC strongly encourages me to take the three shot series or the titer for the Hepatitis B virus. However, I DECLINE to be vaccinated at this time. I understand that by declining to be vaccinated I am at risk of acquiring the Hepatitis B virus.

EOCTC strongly suggests that if I going to have occupational exposure to blood, blood products, and other potentially infectious material in the future, that I should consider being vaccinated with the Hepatitis B vaccine.

Student Name (Print) _____

Student Signature _____ Date _____

Witness Signature _____ Date _____