



NATIONAL PARK COLLEGE

EMERGENCY MEDICAL SCIENCES PROGRAM APPLICATION FORM

Table with 3 columns: Check Programs for which you are applying, Application Period, Degree. Rows include Paramedic, EMT, and various application periods.

*Late applications may be considered based on seat availability and student eligibility.

If you are applying for EMT, do you intend on working toward a technical certificate in Paramedic in the future? Yes No

Date of Birth: _____ NPC ID: _____

Print Full Legal Name: _____ Last Name First Name Middle Name

Preferred Name (if different from legal name): _____

Personal Email: _____ NPC Email: _____

Cell Phone: _____ Work Phone: _____

Mailing Address: _____ Number & Street City State Zip Code

Social Security Number: _____ Do you have a valid U.S. Social Security number? Yes No

Date of desired admission to this program: _____

Have you previously applied to this program? Yes No Date: _____

Have you ever taken a college entrance examination? Yes No Date: _____

ACT SAT Accuplacer Other: _____

List information concerning high schools, colleges, or university attended:

Table with 4 columns: Name of Institution, City & State, Dates (From - To), Degree Received

List Work Experience:

Table with 4 columns: Employer, Location, Dates (From - To), Description of Work

If applying for Paramedic: Arkansas EMS Number: _____ Expiration: _____

Do you have any formal medical training? Yes No

If yes, please list license type and license number: _____

Are you currently a volunteer firefighter? Yes No If yes, Where? _____

How did you hear about this program? _____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

Name: _____ Relationship _____
Last Name First Name

Cell Phone: _____ Work Phone: _____

Because a person can find it difficult, if not impossible, to obtain a license to practice as an EMT/PARAMEDIC under certain conditions, please answer the following questions:

1. Have you ever been convicted of a felony or a misdemeanor? Yes No
2. Do you have a felony charge pending? Yes No

If yes on either of the previous questions, submit an explanation of the felony or misdemeanor, including dates and specific details. Place it in a sealed envelope addressed to the Dean of Nursing and Health Sciences and attach it to this application.

3. Have you ever had an EMT/Paramedic license in the past? Yes No

For your application to be considered complete you must:

1. Apply to NPC if you are not currently a student.
2. Ensure that a copy of high school transcript, General Education Diploma (GED), and/or official college transcripts, if applicable, are submitted to the NPC Registrar office.
3. Ensure a copy of standardized test scores (Accuplacer, ACT, or SAT) are submitted to the Registrar's office.
4. Attach copies of certifications and/or licensures such as: Driver's License, CNA, First Responder, Fire Fighter, Law Enforcement Officer, CPR, PALS, PEARS, and ACLS.
5. Complete entrance exam through PlatinumED. To schedule your exam, for one of the preselected dates, see the Health Science Administrative Assistant.

IMPORTANT INFORMATION:

Please save the completed copy of this application and print. To finalize this application, submit a signed hard copy to the Division of Nursing & Health Sciences.

National Park College provides academic accommodations as mandated by ADA and 504. Please contact NPC's Compliance officer at 501-760-6388 for reasonable accommodations under the American's with Disabilities Act (ADA) and for disability assistance information.

Falsifying any records pertinent to this application can lead to ineligibility or immediate dismissal from the Emergency Medical Sciences programs. I understand that falsifying my application is dishonest and demonstrates a lack of integrity which could compromise my acceptance and/or licensure. _____ (PLEASE INITIAL)

I understand the health care industry requires a criminal background check and drug screening upon employment and random drug testing throughout employment. I also understand that a criminal background check will be required at the time of admission to the program. I understand that the Substance Abuse Policy of NPC Emergency Medical Science Programs may require drug testing during my enrollment for the following reasons: 1) Upon admission into the program. 2) Scheduled testing at unannounced times throughout the program. 3) Random testing as required by the clinical agencies. 4) For cause.

Signature: _____ Date: _____

National Park College in compliance with Title VI of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972 Higher Education Act does not discriminate on the basis of race, color, national origin, sex, or qualified handicap in any of its policies, practices, or procedures. The provision includes, but is not limited to, admissions, employment, financial aid, and other educational services. Any person having inquiries concerning NPC compliance with Title IX is directed to contact the Dean of Students Office on the second floor of the Student Commons or by telephoning (501) 760-4229.

Return the Complete Application and all Documents to:
Nursing & Health Sciences Division
National Park College
101 College Drive Hot Springs, AR 71913