CNM EMT-Paramedic Program

Requirements and Instructions for Online Pre-Registration Screening-Fall 2014

The Pre-Registration Screening Form will be available on the Coordinated Entry Website on May 23rd, 2014 - JULY 16th, 2014 (DEADLINE HAS BEEN EXTENDED)

Students must complete and submit the Pre-Registration Screening form to be eligible to register for the program. The program will begin in Fall 2014 term

MINIMUM REQUIREMENTS FOR PROGRAM:

1. **Complete the following classes with a "C" or better or "In Progress" in Summer 2014:** ***Courses "In Progress" must be on your record with a final grade at the end of Summer 2014 term.***
   - **English 1101:** College Writing
   - **IT 1010:** Introduction to Computers
   - **Math 1210:** Methods of Problem Solving (or higher level math)
   - **Psychology 1105:** Introduction to Psychology
   - **Health 1001:** Clinical Preparation
   - **Biology 1410:** Biology for Health Sciences

2. **A minimum cumulative GPA of 2.5**
   *** View Coordinated Entry Guidelines on GPA for more information**

3. **Completion of FISDAP Entrance Exam**
   - No specific scores are required, but exam must be completed before submitting Pre-Registration Screening Form. Students can take the FISDAP Exam between April 28th -June 23rd, 2014 at the **CNM Assessment Center**, Main Campus. ***TESTING DATES HAVE BEEN EXTENDED TO JULY 16th, 2014***

4. **Must have a current, full New Mexico EMT-B or EMT-I license.** You will provide your license number on the application form.
   - **NOTE: Students with any pending disciplinary actions on their Basic and/or Intermediate license will not be able to enroll in the EMT-Paramedic program.** If you have a pending action on your license, we recommend you contact with the EMS Program Director for more information: Jessica Medrano, **jmiller72@cnm.edu**.

You can take either of the following sets of courses at CNM to prepare for the licensure exam:

EMT-Basic coursework:

- **EMS 1053 -** EMT Basic Theory 6 credit hour(s)
- **EMS 1093 -** EMT Basic Lab 2 credit hour(s)

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	• **EMS 1190 -** EMT Basic Clinical 1 credit hour • **HLTH 1001** Clinical Preparation 1 credit hour **EMT-Intermediate coursework:** *(Basic licensure is required)* • **EMS 1412 –** Advanced EMT (EMT-I) Theory 6 credit hour(s) • **EMS 1492 –** Advanced EMT (EMT-I) Lab 3 credit hour(s) • **EMS 1890 –** Advanced EMT (EMT-I) Clinical 2 credit hour(s) • **HLTH 1001** Clinical Preparation 1 credit hour If you successfully completed EMT-B or EMT-I coursework at another institution (with a C or better), please submit a transcript to the **CNM Records Office** prior to Pre-Registration Screening **Special Note**: Students who have relevant work experience can submit a **Documentation of Experience** form to receive a priority registration date**.** A supervisor/organization official must sign and submit a **Documentation of Experience Form** by June 23rd, 2014 (see pages 4-5 of this document). ***SUBMISSION DEADLINE HAS BEEN EXTENDED TO JULY 16th*** • Students who meet the criteria and submit a Documentation of Experience Form will receive notification of a priority registration date. • Supervisor/organization officials will be contacted to verify submitted Documentation of Experience forms . • Only 10 seats will be open for priority registration. All students who are approved for a priority registration date will receive the same opportunity to register. • Seating is limited, registration is not guaranteed. • Students who are unable to register during the priority registration timeframe will be able to attempt to register during the general paramedic registration period.
STEPS PRIOR TO SCREENING:	1. **Enroll as a CNM student** (if you are not already a CNM student). Go to the **CNM homepage** and click on the "apply" button. 2. **Receive CNM ID number and CNM email address**. Check email address to make sure it is functioning properly, and **contact Information Technology Services** if you have questions. 3. **If you attended other colleges/universities, have all transcripts sent to the CNM Records Office, and allow time for processing.** When evaluation is complete, you will receive an email showing how credits were evaluated.

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	4. **Check your record in MYCNM to make sure the courses (the minimum required courses) are shown with the EXACT course numbers.** If you took a similar course and it did not transfer in exactly as the CNM required course, you will need to request a course substitution and receive official approval before using the course to meet a requirement. Contact the **Academic School** in which the course is housed. 5. Take the FISDAP exam at the CNM Assessment Centers. Results will be sent automatically to the Coordinated Program Entry Office. Information on the FISDAP exam can be found **here**
WHAT YOU NEED TO SUBMIT:	1. **If you took classes at other schools, transcripts must be sent to the CNM Records Office** to be evaluated (see "Steps Prior to Screening" above). 2. **Online EMT-Paramedic Pre-Registration Screening form** (available from May 23rd- July 16th (deadline extended) at www.cnm.edu/CPE 3. **Students who have relevant work experience can submit a Documentation of Experience form to receive a priority registration date.** A supervisor or organization official must sign and submit a **Documentation of Experience Form** (see pages 4-5 of this document).

SPECIAL NOTES:	• Students will be notified of their form status by CNM email. **It is your responsibility to check your CNM account regularly.**
	• **Students who clear the Pre-Registration Screening process will be given permission to register for the Paramedic Program:**
	  ○ Students will be notified of the date, time, and what courses to register for the program via their CNM email account
	  ○ Students who successfully register the Paramedic Program will begin in Fall Term 2014.
	  ○ Students register for the program will have to complete pre-clinical requirements, including a background check, drug screening, and immunizations. More information is available through the **Office of Verification and Compliance**.
	• Students who are "In Progress" with required courses in summer 2014 must complete the courses with the required grade to be eligible to start the program in fall 2014. If you do not complete these courses successfully, you may lose your seat in the program. **View Coordinated Entry Guidelines on "In Progress" Courses**

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Please contact the CNM Coordinated Program Entry Office if you have questions.

Central New Mexico Community College
Coordinated Program Entry Office
Documentation of Experience Form: EMT-Paramedic Program 2014

Dear supervisor or organization official:

The following individual: _____ is attempting to receive priority registration for the EMT-Paramedic Program at Central New Mexico Community College. Students can receive an earlier registration date for having relevant experience (volunteer or work) related to the EMT field, provided their supervisor or organization official submit this form to document that they completed the experience. **The supervisor or organization official must submit the form – not the student.** When complete, this form may be submitted in any of the following ways: 1) scanned and emailed as a PDF document to ***cpe@cnm.edu*** , 2) or faxed to 505-224-4120.

Forms must be received by 5 p.m. on the extended deadline of July 16th, and must include your signature. It is the student's responsibility to provide you with this form and enough time to complete it prior to the deadline for the program.

Please provide information below to document the student's experience with your organization. Note that this form does not constitute a *reference* for the applicant; rather, it is meant to document relevant experience the applicant gained related to the education field.

If you have questions, please contact the Coordinated Program Entry Office at 505-224-4111, or visit our website at: www.cnm.edu/CPE Thank you for your time.

Sincerely,
Coordinated Program Entry Office, Central New Mexico Community College

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DOCUMENTATION OF EXPERIENCE

To be filled out by a supervisor or organization official- This form must be submitted by July 16th (Deadline extended)

1.) **Name of individual applying to CNM program**:_____

2.) **Your name:** _____

3.) **Your title:** _____

4.) **Your organization/employer:** _____

5.) **Your phone number:** _____

6.) **Your email:** _____

7.) **Applicant's job title/role:** _____
   a. **Does this role involve direct patient care**: **CIRCLE ONE: YES / NO**

8.) **The applicant worked/volunteered from** _____ **(date) to** _____**(date) with the organization**.
   a. **CIRCLE ONE: Paid Volunteer**

9.) **The applicant worked/volunteered** _____**hours per week during this time period**.
   a. **CIRCLE ONE: Paid Volunteer**

10.) **With this organization, did/does this applicant provide direct patient care in the <u>pre-hospital</u> setting?**
   a. **CIRCLE ONE: YES / NO**

11.) **With this organization, did/does the applicant provide direct patient care in the <u>hospital</u> setting?**
   a. **CIRCLE ONE: YES / NO**

12.) **Does this applicant have more than one job/role with your organization? CIRCLE ONE: YES/ NO**
   If yes, please describe:_____

13.) **Your signature:**
   _____

Thank you for your assistance!

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