

Dear Prospective Student:

Thank you for your interest in our Nationally Registered Paramedic (NRP) Program. The field of EMS is a rapidly growing, fast paced and exciting profession for both the volunteer and career provider. The NRP Program is a 28-credit certificate program that meets once a week and about four Sundays each semester. The curriculum follows the National Emergency Medical Services Education Standards and prepares the EMT-Intermediate or CRT licensed individual to acquire the skills necessary to take the national certification and state protocol examinations for paramedics.

The classes and labs will be held in the new Health Professions and Athletics Center (HPAC) on the main campus. The certificate may be applied to the requirements for an Associate of Applied Science degree in Emergency Medical Services.

If you have a current Maryland CRT/EMT-I license and want to apply to our NRP Program, please review the attached information and return the application and other required information to the Chesapeake College Health Professions Department. You may also visit [www.chesapeake.edu/alliedhealth/ems](http://www.chesapeake.edu/alliedhealth/ems) for more information. Included in this packet is an "Application Check List" and detailed directions for taking the ACCUPLACER Placement Tests. **The application deadline is March 31<sup>st</sup>.**

If you would like more information about this career, please contact our Health Professions advisor.

Ms. Lorraine Holden  
Dorchester Building, Room D-152  
410-822-5400, ext. 2203 or email: [lholden@chesapeake.edu](mailto:lholden@chesapeake.edu)

Sincerely,

Mr. Jon Longest, M.Ed., NRP  
EMS Program Director

Rev. 2/2016

*Field work, clinical placements, and certification/licensure will involve drug testing and /or background checks performed at the student's expense.*



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## Application Check-List Nationally Registered Paramedic Program (516)

This checklist has been created to assist applicants in completing the admissions requirements. Admission to the NRP Program is limited, therefore, selection is competitive. Visit our website at [www.chesapeake.edu/alliedhealth/ems](http://www.chesapeake.edu/alliedhealth/ems) for more information.

Complete applications are the responsibility of the applicant and necessary for consideration for admission to the program. Please contact Mr. Jon Longest at [jlongest@chesapeake.edu](mailto:jlongest@chesapeake.edu) or at 410-822-5400 ext. 2724 if you have any questions.

*All required information must be received by March 31 to be considered by the Admissions Committee*

**Please mail your application and all supporting documents to:**  
Chesapeake College/EMS Program  
P.O. Box 8  
Wye Mills, MD 21679

**All of the following must be completed in order for your application to be complete:**

- Copy of high school diploma or GED certificate  
An official copy of your high school transcript is acceptable  
An official copy of your college transcript is acceptable if you have a degree  
*If you graduated from the CRT program at Chesapeake this information is already on file*
- Copy of current CPR card
- Copy of current Maryland CRT-I card or National Registry EMT-I card/letter
- Complete the ACCUPLACER Placement tests in English, Reading and Arithmetic.  
Please refer to "ACCUPLACER Placement Test Directions" that is included with this mailing for more details.

*If you have taken the CRT program at Chesapeake within the last 2 years, you do not have to retake the ACCUPLACER.*

- Apply to Chesapeake College  
Admissions information can be found at <http://chesapeake.edu/admissions/apply.asp>.  
Applications can also be picked up at the Wye Mills and Cambridge campuses

*If you took CRT the year immediately prior to applying for the paramedic course, you will need to submit another college application. (Required due to changing the major code)*

- Complete the program specific application  
It can be downloaded from the Chesapeake College website if the general college application has been completed and accepted.
- Complete the "EMS Applicant Evaluation Form"  
Two company level supervisors will complete this form and forward it to Mr. Longest



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## ACCUPLACER Placement Test Directions

This document will give additional directions and information about the ACCUPLACER placement tests that are required for the Cardiac Rescue Technician and Nationally Registered Paramedic Programs.

**The CRT and NRP Programs require that applicants take the ACCUPLACER in reading, sentences, and arithmetic.**

The passing score for arithmetic is 65 or higher. The passing score for sentences is 90 or higher.

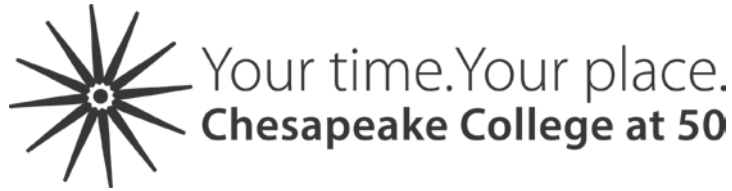
The passing score for reading is 80 or higher.

**The following people are exempt from ACCUPLACER:**

- Paramedic applicants that were admitted to the Chesapeake College CRT Program do not need to retake these exams.
- Applicants with a college degree  
An official college transcript must be sent to the college with your application. If the degree is from Chesapeake an official transcript is not required.
- Applicants who have completed ENG 094 and MAT 023 or higher level  
An official college transcript is required to verify and document a grade of "C" or better in each course. If the courses were taken at Chesapeake, an official transcript is not required.

### Procedures

- Prepare for ACCUPLACER by clicking [HERE](#) and complete math exercises at [www.math.com](http://www.math.com). SAT prep books can also provide a review before assessment.
- Schedule by calling the Testing Center at 410-822-5400 ext. 2344. Please click this link for more information: [ACCUPLACER and Placement Testing Information](#).
- Present photo ID
- Arrive at least two hours before closing time to take the assessment
- Request a printed copy of your results and attach them to your program specific application
- If retesting is necessary you must wait at least 24 hours and complete a self-study before taking the test again. Only the first test is free of charge.
- If a passing score on these tests *cannot* be obtained, it will be necessary for the applicant to take the appropriate English and/or a math course(s).



Your time. Your place.  
Chesapeake College at 50

### ACCUPLACER Request

- Prepare for ACCUPLACER by clicking [HERE](#) and complete math exercises at [www.math.com](http://www.math.com). SAT prep books can also provide a review before assessment.
- Schedule by calling the Testing Center at 410-822-5400 ext. 2344. Please click this link for more information: [ACCUPLACER and Placement Testing Information](#).
- Present photo ID
- Arrive at least two hours before closing time to take the assessment
- Request a printed copy of your results and attach them to your program

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

Student: \_\_\_\_\_

Program: Cardiac Rescue Technician (CRT) and Nationally Registered Paramedic (NRP)

ACCUPLACER for:

\*Reading Comprehension:   X   First \_\_\_\_\_ Second \_\_\_\_\_

\*Sentence Skills:   X   First \_\_\_\_\_ Second \_\_\_\_\_

\*Arithmetic:   X   First \_\_\_\_\_ Second \_\_\_\_\_

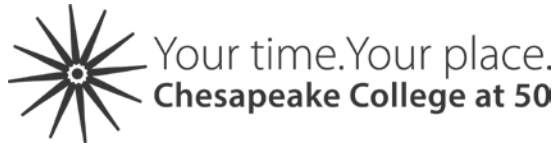
\*Elementary Algebra: \_\_\_\_\_ First \_\_\_\_\_ Second \_\_\_\_\_

\*College Algebra: \_\_\_\_\_ First \_\_\_\_\_ Second \_\_\_\_\_

Advisor's Signature: *Jonathan Longest*

WIB Counselor (if applicable) \_\_\_\_\_

Chesapeake College is Regional Community College and an Equal Opportunity Institution



**Chesapeake College Applicant Evaluation Form  
EMS Program**

**Directions:** This form is used by the college as an evaluation tool to assist in the admission process. Section one provides statistical and general information to assess EMS experience. Section two contains two evaluations that need to be completed by two separate supervisors or officers. If you have any questions about this form, please call Mr. Jon Longest at 410-822-5400 ext. 2724 or email at jlongest@chesapeake.edu. Please mail the completed form to:

**Mr. Jon Longest  
Chesapeake College  
P.O. Box 8  
Wye Mills, MD 21679**

Thank you for taking the time to support your member and the Chesapeake College EMS Program.

**Section One**  
Can be completed by company statistician

**Applicant's Name:** \_\_\_\_\_

<b>EMT/CRT Experience</b>	
Date of initial EMT/CRT certification (month/year)	
Number of EMS calls this year to date	
Number of EMS calls last year	
Total number of EMS calls with your company	
Any additional EMS duties/positions	

Additional Comments:

# Evaluation 1

DATE OF EVALUATION:	EVALUATOR:
<b>⇒ Please rate the applicant in the following categories</b>	
<b>GRADING SCALE</b>	
5 Very Good 4 Good 3 Needs minor improvement 2 Needs major improvement 1 Unacceptable	
<b>APPLICANT EVALUATION</b>	
(CIRCLE)	
5 4 3 2 1	<p><b><u>Professionalism / Attitude:</u></b> <i>The applicant's behavior demonstrates integrity, empathy, self-motivation, self-confidence, team work, diplomacy, respect, patient advocacy, careful delivery of service, appropriate appearance and personal hygiene.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b><u>Learner Characteristics:</u></b> <i>Accepts constructive criticism, takes personal responsibility for self-improvement.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b><u>Medical Knowledge:</u></b> <i>Does the applicant provide excellent patient care and demonstrates proper Basic Life Support patient management.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b><u>Communication Skills:</u></b> <i>Interacts with patients and other members of the EMS Department in an appropriate manner. Performs and reports patient assessments, completely and proficiently.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b><u>Leadership Skills and Abilities:</u></b> <i>Ability to successfully lead the EMS team during while providing patient care.</i></p> <p>ADDITIONAL COMMENTS:</p>

**What are the applicant's strengths as an EMS Provider?**

**What are area(s) the applicant need to improve upon?**

**Signature:**

**Title:**

**Date:**

## Evaluation 2

DATE OF EVALUATION:	EVALUATOR:
<b>⇒ Please rate the applicant in the following categories</b>	
<b>GRADING SCALE</b>	
5 Very Good 4 Good 3 Needs minor improvement 2 Needs major improvement 1 Unacceptable	
<b>APPLICANT EVALUATION</b>	
(CIRCLE)	<p><b>Professionalism / Attitude:</b> <i>The applicant's behavior demonstrates integrity, empathy, self-motivation, self-confidence, team work, diplomacy, respect, patient advocacy, careful delivery of service, appropriate appearance and personal hygiene.</i></p> <p>5 4 3 2 1</p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b>Learner Characteristics:</b> <i>Accepts constructive criticism, takes personal responsibility for self-improvement.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b>Medical Knowledge:</b> <i>Does the applicant provide excellent patient care and demonstrates proper Basic Life Support patient management.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b>Communication Skills:</b> <i>Interacts with patients and other members of the EMS Department in an appropriate manner. Performs and reports patient assessments, completely and proficiently.</i></p> <p>ADDITIONAL COMMENTS:</p>
5 4 3 2 1	<p><b>Leadership Skills and Abilities:</b> <i>Ability to successfully lead the EMS team during while providing patient care.</i></p> <p>ADDITIONAL COMMENTS:</p>



**What are the applicant's strengths as an EMS Provider?**

**What are area(s) the applicant need to improve upon?**

**Signature:**

**Title:**

**Date:**