



Emergency Medical Services Program Admissions Application

Please email the Program Director this completed form along with supportive documentation such as copies of certifications, reports, and college transcripts from other institutions (if transferring courses). If you have not already submitted official college transcripts, please attach unofficial transcripts to this application.

NAME

ADDRESS (Line 1)

ADDRESS (Line 2)

CELL/WORK PHONE HOME PHONE EMAIL ADDRESS

Note: The EMS Paramedic Program will not be responsible for address, telephone and/or email address changes that could result in our inability to reach you.

- Applicants must successfully complete all prerequisites PRIOR to the application deadline and before registering for the first EMS Paramedic class unless otherwise approved by the program director.
- Successful completion of all prerequisites and submission of this application does NOT guarantee acceptance into the EMS Paramedic Program
- If accepted but you do not accept your seat this year, you must reapply next year.

I understand that if I have ever been convicted of a felony charge and am accepted into the Emergency Medical Services Program at Baltimore City Community College, I may not be able to complete the program, obtain certification and/or licensure, or obtain employment in the field.

Signing your name below indicates that you have read and fully understand what is required of you concerning this application.

NAME

DATE