



Central Jackson County Fire Protection District  
Kirk Lair-Fire Chief  
805 NE Jefferson  
Blue Springs, MO 64014

816-229-2522  
816-229-5110 Fax  
www.cjcfpd.org

Dear Prospective EMT Student,

Thank you for your interest in the CJCFPD EMS programs! The next EMT course will begin on Thursday, July 7, 2022. Class will be held each Tuesday and Thursday evening at the Central Jackson County FPD Education Center, in Blue Springs, MO. Class times will be from 5:30pm to 10:00pm.

All lectures and supporting study information will be accessed through a program called JB Learning. Lessons consist of interactive lectures, quizzes, e-book chapters, games, videos, and other resources. The lessons will be assigned each week for the students to complete on their own, before attending class. Classroom time will be spent reviewing the information, and applying the lessons through student led drills, team exercises, and hands-on skills labs. **It is a requirement of this course to have a working laptop that can be used at home and in class.** Phones and tablets will not be sufficient.

Course tuition is **\$1730.00**, which is all inclusive of student expenses (access to the blended learning classroom and the textbook, uniform shirts, lab fees, liability insurance, and software fees for testing and clinical tracking). **Students will be responsible for their National Registry testing fees.**

A non-refundable registration fee of \$30.00 with your application is required to secure your seat in class. If paying in scheduled payments the first payment due the first night will be \$750, with additional 3 monthly payments of \$250.00.

You may mail or return your application and deposit any day Monday through Friday from 8am to 4:30pm at the CJCFPD Education Center, at 4715 W 40 Highway, Blue Springs, MO 64015. Class size is limited and will be filled on a first received. ***Applications need to be received no later than June 24, 2022.***

Again, thank you for your interest. If you need further information, please do not hesitate to call, or email [classreg@cjcfpd.org](mailto:classreg@cjcfpd.org).

Sincerely,

EMS Education Staff  
Steven P. Westermann Fire and EMS Education Center  
4715 W US 40 Hwy  
Blue Springs, MO 64015  
816-229-9118  
Fax 816-229-2152

## Entrance Requirements

All applicants to the Central Jackson County Fire Protection District's EMT-Basic Program must meet the following criteria to be considered for program acceptance.

1. Required to be 18 years of age or older prior to course completion.
2. Complete EMT-Basic student program application.
3. Able to perform the normal functions of an EMT.
4. Verification of required immunizations and additional required documents.

**Required documents below must be submitted no later than the 1<sup>st</sup> night of class**

1. Provide copy of driver's license.
2. Submit felony statement (if applicable).
3. **Verification of required immunizations**
  - **Current Hepatitis B Series (3 shots series) or Hepatitis B Titer**
  - **Varicella (Chicken Pox) Titer or record of receiving 2 immunizations**
  - **Measles/Mumps/Rubella (MMR) Titer or record of receiving 2 immunizations**
  - **Current Tdap-Record of receiving one in last 10 Years**
  - **TB Skin Test-Record of TB Skin test or negative chest x-ray within last year.**
  - **2022 Influenza Vac will be required after October 1, 2022**
4. Provide at least one letter of recommendation from a person currently in the healthcare field.
5. Submit a one-page essay on why candidate is applying to the program.

# Central Jackson County Fire Protection District

## EMT-Basic Student Application

<b>Last Name:</b>		<b>First:</b>			<b>Middle:</b>		
<b>Home Address:</b>							
<b>City:</b>		<b>State:</b>			<b>Zip:</b>		
<b>Home Phone:</b>		<b>Cell Phone:</b>		<b>E-mail:</b>			
<b>Age:</b>		<b>Date of Birth:</b>		<b>Social Security #</b>			
<b>Have you ever been convicted of a Felony?</b>				<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>	<b>Yes (Attach Details)</b>

- Release Authorization: I request and authorize Central Jackson County Fire Protection District on my behalf of the information needed for entry into the EMT course. I am aware and agree that this information may be shared with the clinical sites that are required part of this educational program.
- I agree to the total tuition due and payment plan for money owed to Central Jackson County Fire Protection District. I understand that failure to pay any installment when due may result in my removal from the program. I understand and agree that after the first day neither my voluntary withdrawal nor my involuntary removal from the program will release me of my financial obligation to Central Jackson County Fire Protection District.
- I have reviewed the information presented on this form and I agree that it is correct as stated.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

Shirt Size (circle)    S      M      L      1X      2X    3X    4X

Application Received _____
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