



2018 Emergency Medical Responder Course Application Package

Application Period Closes on December 22, 2018

Please submit application to the Northern Arizona Consolidated Fire District administration office:

Northern Arizona Consolidated Fire District #1
2470 Butler Ave
Kingman, AZ 86409

If you have any questions concerning this application
Please contact the EMS Office at
(928) 757-3151



Requirements:

- Must be at least 16 years of age to apply
- AHA CPR/AED
- Hazardous Materials First Responder Awareness
- ICS 100, 200, 700a.
- Completed application
- Ability to register with NREMT as a NREMT EMR

Note: You MUST have the ability to obtain all the requirements prior to the final cognitive exam.

Application Submission:

- Completed/Signed Student Application Sheet
- Documentation of requirements

Required Immunizations:

- No immunizations are required for entry into the NREMT EMR course

Background Check/Drug Screening:

- NREMT EMR does not include clinical and/or field rotations. No background or drug screenings are required.

The National Registry of Emergency Medical Technicians (NREMT) has adopted a Criminal Conviction Policy to safeguard the public from individuals who, in practice as an EMS professional, might pose a danger to the public. The policy can be found at www.nremt.org/rwd/public/document/policy-criminal. You may also contact the NREMT at 1-614-888-4484. Individuals interested in obtaining initial Arizona certification as an EMR must be nationally registered.

Program Cost

Course	Cost
NREMT EMR Course (Text Book Included)	\$250.00

REQUIRED TEXT BOOK		
Emergency Medical Responder: Your first response in Emergency Care.	American Academy of Orthopaedic Surgeons (AAOS) 6 th edition.	ISBN: 9781284134162

Thank you for your interest in our program. For more information please contact

Brian Grant

2470 Butler Ave

Kingman, AZ 86409

b.grant@northernazfire.com

928-757-5307



EMR Program Application

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Last four of Social Security: _____ DL# _____ DOB: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

EMR STUDENT QUALIFICATIONS
<p>An EMR Student MUST be able to perform the following functions:</p> <ol style="list-style-type: none"> 1. Stand, sit and walk continuously for up to eight hours. 2. Visual acuity and depth perception to read SOPs. 3. Hearing acuity to hear machine alarms, AED prompts, normal conversations, and through stethoscopes. 4. Safely handle blood and other body excretions and secretions. 5. Perform basic resuscitation and emergency procedures according to CPR protocols. 6. Lift, move, position, and otherwise handle patients to minimize discomfort and provide basic care. 7. Ability to lift 70 pounds from floor to waist-high; 250 pounds with assistance. 8. Lift, move, and operate equipment used in the care of patients. 9. Assist with or administer treatments and therapies using potentially hazardous equipment 10. Manual dexterity to manipulate equipment, buckle and unbuckle, apply dressings and binders. 11. Psychological stability to perform effectively under stress. 12. Ability to exercise critical thinking, reasoning and judgment in a client care situation.
UNDERSTANDING OF REQUIREMENTS
<p>As an EMR student with NACFD, I understand I must be able to meet the above physical requirements. I have read and understand the requirements, and I am able to perform all the above listed functions.</p> <p>As an EMR student with NACFD, I understand that I must provide the following requirements:</p> <ol style="list-style-type: none"> A. AHA CPR/AED (will be offered on 01/04/2017 if needed.) B. ICS 100 C. ICS 200 D. ICS 700.a E. Approved Hazardous Materials Awareness Certification <p>As an EMR student with NACFD, I understand that failure to provide CURRENT documentation prior to the final cognitive exam will result in dismissal from the program.</p>

Student Name (please print): _____ Date: _____

Student Signature: _____