EMT200 EMT Refresher Student Contract

I, ______________________________ by signing this contract, agree with the following:

“Out-of-State” applicants must show proof of current state or National Registry certification to be eligible to take the EMT Refresher course. National Registry written and practical testing is required if not currently nationally certified.

Arizona certification that has expired but is within two years from the expiration date may take the EMT Refresher course and must take National Registry written exam.

It is the student’s responsibility to complete the refresher course prior to certification expiration. Students are solely responsible for delivering their applications to Department of Health Services. MCC will not deliver, mail, or fax applications for students. Students may fax applications themselves to ADHS with a copy of the course completion certificate.

I understand that the EMT Refresher course offered at Mesa Community College does not by itself fulfill all of the requirements of National Registry recertification. Consult the NREMT guidelines for recertification requirements.

I am currently certified in CPR at the (AHA) “Healthcare Provider” level, (ARC) “Professional Rescuer” level, (ASHI) “CPR Pro” level (Green Cross) “Rescuer” level or (Military Training Network) “Meets 2010 AHA guidelines for CPR and ECC” Health Care Provider.

I understand that all written and practical testing and retesting must be completed within six months from the official end date of the course. I understand that I must successfully complete all of the requirements of the EMT Refresher course and pass the course written test with a minimum score of 75%. If needed, a total of three attempts are allowed to pass the written and practical tests.

Certification expiration date _________________________________
(month, date, and year)

Arizona Cert. _______ Not Certified _______ Out-of-State _______

Signature _____________________________ Date _____________
Please complete the following information:

Print Name ______________________________       Semester ________________
Dates of Class ____________________________           Section Number ________________
Student ID # _____________________________       Last 4 digits of SS# ____________
Phone Number (_______)__________________

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PLEASE ATTACH A COPY OF CURRENT:
• CPR PROVIDER CARD - (FRONT & BACK) ☐
• ARIZONA OR OTHER STATE EMT CARD ☐
• PICTURE ID ☐

RETURN DOCUMENTS AND CONTRACT TO THE MCC FIRE SCIENCE/EMS DEPARTMENT
145 N. CENTENNIAL WAY 4TH FLOOR
MES A, AZ 85201
PHONE: 480-461-6300
FAX: 480-461-6222

Students wishing to register for EMT200 (EMT Refresher) must be enrolled as a student with MCC. To enroll, visit www.mesacc.edu/enroll/new-students/

__________________________________________________________________________

This section to be filled out by office personnel:

The above named student has met the pre course qualifications for EMT200.

Staff Member ________________________     Date ______________