



ANNOUNCEMENT

Winter 2019 EMT Academy

The Yakima County Department of EMS has schedule a Winter 2019 EMT Academy for 30 qualified individuals. Unfortunately, at this time, we are unable to take students who are not affiliated with a pre-hospital EMS agency.

- Date: **December 8, 2019, 1 pm – 5 pm Pre-Course Mandatory Meeting**
 January 7, 2019 – April 29, 2019
 Mondays, Thursdays, and Saturdays
- Time: 6 pm - 10 pm on Mondays and Thursdays
 8:00 am - 4 pm on Saturdays, unless otherwise noted
- Location: Yakima County Resource Building – Classroom, 2403 S. 18th Street, Union Gap
- Cost: No charge for students who are **affiliated with a Yakima County EMS agency supported by the Yakima County EMS levy.**
Affiliated Students who are with an agency not supported by the Yakima County EMS Levy will need to include a \$50 Application fee, which is refundable up to December 8, 2018. Once the student is accepted, the \$50 application fee will be applied towards the cost of tuition of \$1125. Tuition includes online workbook, online access to EMS Testing, student textbook and the use of other issued required equipment.

To register for the class please fill out the enclosed application and attach copies of pre-requisite course work and required documentation. Return completed applications to the Yakima County Department of EMS, 2403 S. 18th Street, Suite C, Union Gap, WA 98903 no later than **October 22, 2018**. If your application and documentation have not been received by this time, your application may be denied without notice. **All applicants are required to attend the pre-course screening and orientation, as well as a scheduled interview. Applicants will receive an email with the dates/times that the interviews will be held. Applicants are required to respond to the email to set the date and time for their interview. Applicants that are not able to attend the Screening and Orientation may be considered for the following year.**

The minimum qualifications and pre-requisites for all students are):

- Must be at least 17 years old when course begins
- High School Diploma or GED at the beginning of course
- Current CPR-BLS for Healthcare Provider or equivalent credential.
- Copy of a driver’s license or other photo identification

A course will be offered on Saturday, 12/1/2018. The cost of the CPR course is \$15 and includes your certification card.

An AHA Heartsaver course is not considered equivalent. Please contact the Yakima County EMS office to confirm your card meets the standard for national testing.

- NIMS certification IS 100.b, IS 200.b, IS 700.a, & IS 800.b <http://training.fema.gov/IS/NIMS.asp>
- Professional liability insurance (see below)
- WSP Background Check within the last 10 years (see below)
- Health insurance that covers the student
- Drug Screening by Certified Lab within the last year (see below)

Vaccination Requirements (there are declination forms available)

- 2 MMR Vaccine or a Rubella/Rubeola/Mumps titer
- Pertussis (Whooping Cough)
- Tuberculosis – 1 Step within the last year
- Proof of current Hepatitis B vaccination
- Tetanus
- Flu vaccine is *recommended but not required*

All students are required to dress professionally at all class days. Shirts will be provided, but all students must have the following:

- Dark colored EMS Pants, Jeans or Slacks (pants are available for purchase for \$35)
Zero tolerance for “fashion jeans” or holes in the jeans.
- Black or dark colored closed toe shoes or boots
- Belt that is black or dark colored
- Shirts must be tucked in

All students are required to prove that they have medical insurance that covers the student (through work or private insurance or department) and professional liability insurance. Professional Liability – Student Coverage may be obtained by contacting: HPSO, 1-800-932-9491, www.hpso.com

All students must have a “background check” and “drug screening”. Forms are available for those students who need to obtain a drug screening (students must pay for the screening) on our website: <http://www.yakimacountyems.com/applicationforEMT-training.html>. The forms are for Yakima Worker Care or you may use another certified lab. A drug screening that was completed within the last year is acceptable. Proof must be provided.



Yakima County Department of Emergency Medical Services
2403 S. 18th Street, Suite C, Union Gap, WA 98903 • (509) 574-2145 • FAX (509) 574-2159



Background checks may be done on-line with the Washington State Patrol: <http://www.wsp.wa.gov/crime/chrequests.htm> Go to "WATCH" listed on left side of screen. A background check that was done by an agency within the last 10 years is acceptable. Proof must be provided.

Students affiliated with an EMS agency or Fire district will receive a course completion certificate from the YCDEMS, provided all requirements of the course have been successfully completed. To receive a Washington State issued EMT card, students must also:

- Successfully complete the National Registry Exam within 24 months. Note students must repeat a portion of the testing process if the cognitive exam is not completed in 12 months. Students are strongly encouraged to take the NREMT cognitive exam within 3 months of the last scheduled day of class.
- Complete the Washington State Initial Certification paperwork and return it to the YCDEMS Office for MPD signature. The paperwork will be forwarded to the Washington State DOH.

Those students who are not affiliated will receive a course completion certificate from the YCDEMS to receive a Washington State issued EMT card students must:

- Successfully complete the National Registry cognitive Exam within 24 months
- Comply with all requirements within WAC 246-976-141 (Washington Administrative Code)
- Complete the Washington State Initial Certification paperwork and return it to the EMS Office for MPD signature. The paperwork will be forwarded to the Washington State DOH.

The schedule is subject to change, as needed. If you have any questions, or concerns, please call the office at 509-574-2145.



Yakima County Department of EMS 2403 S. 18 th Street, Suite C, Union Gap, WA 98903 (509) 574-2145 FAX: 574-2159				<h2 style="margin: 0;">Application for EMT Training</h2> <p style="margin: 0;">(please see course requirements at bottom)</p>	
Personal Data	Shirt Size _____	Pant Style: EMS or Fire	Pant Size Men _____	Pant Size Women _____	Course: <input type="checkbox"/> Winter 2019
Name (Last, First, MI)					Date:
Social Security Number:			Current Certification (if applicable):		
Birthdate:	Age:	Phone () Can receive text message Y/N		Message Phone ()	
E-Mail (Mandatory for Class):					
Mailing Address:					
Street Address (if different):					
City:				State:	Zip Code:
Applicants Signature:					
EMS Agency Data					
EMS Agency Affiliation:					<input type="checkbox"/> None
Fire Chief or Supervisor:				Daytime Phone: ()	
Agency Mailing Address:					
E-Mail:					
Who will provide professional liability insurance and health insurance that covers student?					
<input type="checkbox"/> EMS Agency			<input type="checkbox"/> Self		
Agency Approval Signature					
<p>I, the undersigned, hereby approve attendance to this training course by the individual named on this application. As an employee or member of our organization, a background check, and drug screening has been completed on the individual (proof will be provided). This individual will also have professional liability and health insurance while involved in any training activities or clinical experiences and proof of such will be provided to DEMS with this application. This individual has received his/her Hepatitis B Vaccination Series (3), MMR vaccines (2) or a titer, 1 Tdap vaccine, and TB 1 step within the last year. <i>Flu vaccine (recommended – not required).</i> (Declinations are available for vaccines).</p>					
Fire Chief or Supervisor:					Date:
Method of Payment					
<input type="checkbox"/> Bill to EMS Organization			<input type="checkbox"/> Applicant will Pay by January 4, 2019 (Check/Cash/Money Order)		
<i>(office use only)</i>					
Date Received: _____ Comments: _____					
Tuition Amount Owed: _____ Tuition Amount Paid: _____					



Course Requirements:

- Copy NIMS Certificates for IS-100.b, IS-200.b, IS-700.a and IS-800.b – **all applicants**
- Copy of Current Driver's License or other photo identification, **must** be 17 years old at beginning of course – **all applicants – If photo ID expires during course a copy of the new photo ID must be given to the office.**
- Copy of High School Diploma or GED, **must** have completed high school or GED at beginning of course – **all applicants**
- Proof of the following Vaccinations or Titters (test to determine antibodies): 3 Hepatitis B, 2 MMR, 1 Tdap Vaccine (Tetanus, Diphtheria & Pertussis), or a completed declination – **all applicants**
- Flu vaccine – *recommended but not required*
- Tuberculosis Screening (TB 1 Step) with in the last year – **all applicants**
- Current CPR-BLS for "Healthcare" Provider or equivalent credential (A course will be offered on Saturday, 12/1/2018 for those who don't hold a current certification. The cost is \$15 and includes your certification card.)
An AHA Heartsaver course is not equivalent.
- Copy of Health Insurance that covers applicant – **all applicants**
- Copy of Professional Liability Insurance – **all applicants**
- Proof of background check performed by the Washington State Patrol or through agency within last 10 years – **all applicants**
- Proof of a drug screening performed by a certified lab within the last year – **all applicants**
- Dark colored pants, belt and closed toe shoes or boots – **all applicants**



	DATE	TIME
1	Saturday, December 1, 2018 (if needed)	0900-1300
2	Saturday, December 8, 2018	1300-1700
2	Monday, January 07, 2019	1800-2200
3	Thursday, January 10, 2019	1800-2200
4	Saturday, January 12, 2019	0830-1600
6	Monday, January 14, 2019	1800-2200
7	Thursday, January 17, 2019	1800-2200
8	Saturday, January 19, 2019	0830-1600
10	Tuesday, January 22, 2019	1800-2200
11	Thursday, January 24, 2019	1800-2200
12	Saturday, January 26, 2019	0830-1600
14	Monday, January 28, 2019	1800-2200
15	Thursday, January 31, 2019	1800-2200
16	Saturday, February 02, 2019	0830-1600
18	Monday, February 04, 2019	1800-2200
19	Thursday, February 07, 2019	1800-2200
20	Saturday, February 09, 2019	0830-1700
22	Monday, February 11, 2019	1800-2200
23	Thursday, February 14, 2019	1800-2200
24	Saturday, February 16, 2019	0830-1600
26	Tuesday, February 19, 2019	1800-2200
27	Thursday, February 21, 2019	1800-2200
28	Saturday, February 23, 2019	0830-1600
30	Monday, February 25, 2019	1800-2200
31	Thursday, February 28 2019	1800-2200
32	Saturday, March 02, 2019	0830-1600
34	Monday, March 04, 2019	1800-2200
35	Thursday, March 07, 2019	1800-2200
36	Saturday, March 09, 2019	0830-1600
38	Monday, March 11, 2019	0830-1600
39	Thursday, March 14, 2019	1800-2200



	DATE	TIME
40	Saturday, March 16, 2019	0830-1700
42	Monday, March 18, 2019	1800-2200
43	Thursday, March 21, 2019	1800-2200
44	Saturday, March 23, 2019	0830-1600
46	Monday, March 25, 2019	1800-2200
47	Thursday, March 28, 2019	1800-2200
48	Saturday, March 30, 2019	0830-1630
49	Monday, April 01, 2019	1800-2200
50	Tuesday, April 02, 2019 – Friday, April 26, 2019	Must complete ambulance ride time and the NREMT Written Exam
75	Saturday, April 27, 2019	0830-1300