



4169 Old Mill Parkway  
St. Peters, MO 63376  
636.344.7600  
www.sccad.com

---

April 13, 2021

Dear Prospective Paramedic Student;

Thank-you for your interest in the St. Charles County Ambulance District Paramedic Program. Enclosed is an application packet for our program. Please review it carefully. Please note the application deadline and make a note of the other *important dates* on the front of the packet. There is a high level of interest in our program and we will not be able to accept applications that do not meet the stated deadlines.

You must take the pre-admission test **prior to** your interview (a \$26 non-refundable fee applies). More information regarding testing will be sent to you upon receipt of your application. And, if you need to take Human Biology, contact St. Charles Community College.

Please consider your willingness and availability to meet the extensive time requirements needed for class, clinical and studying. The program is very intense.

This will be the fifteenth paramedic program at SCCAD. We are looking forward to continuing to develop the program and hope that you will choose to be a part of that.

***Due to the recent COVID-19, our District and Training Center buildings may have limited access to the public. Please either mail or scan/email your application to Becky Price at [bprice@sccad.com](mailto:bprice@sccad.com). The last page of the application needs to be notarized, if you cannot find a banking institution or other notary facilities open, you may turn that page in at a later time.***

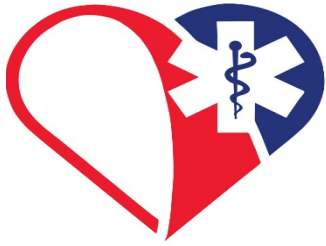
Please contact Kim McKenna at 636-344-7662 or Becky Price at 636-344-7663 if you have any questions regarding our program, or the application process.

Sincerely,

*Kim McKenna*

Kim McKenna PhD RN EMT-P  
Director of Education

---



# **St. Charles County Ambulance District**

---

## **Training Center**

### **Paramedic Program 2021 - 2022**

## **APPLICATION PACKET**

### **Important Dates**

**PARAMEDIC PROGRAM APPLICATION DEADLINE:**

**Monday, JUNE 7, 2021 BY 4:00 PM**

(Scheduling information will be sent after application is turned in.)

#### **PRE-ADMISSION TESTING:**

**May 26<sup>th</sup>: 2-4 pm**

**June 2<sup>nd</sup>: 8-10 am**

**June 10<sup>th</sup>: 5-7 pm**

**June 11<sup>th</sup>: 1-3 pm**

**\$26 Non-Refundable Testing Fee**

#### **PRE-ADMISSION INTERVIEWS:**

Will be scheduled the last week in  
May and early June 2021

**MANDATORY ORIENTATION: 0830-1200 Saturday, July 31, 2021**

**CLASS BEGINS: Tuesday, August 17, 2021 (8am-5pm)**

## St. Charles County Ambulance District Paramedic Program General Information 2021-2022

St. Charles County Ambulance District offers a paramedic program once a year beginning the third week of August.

The St. Charles County Ambulance District Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

### CAAHEP

254000 U.S. Highway 19 North, Suite 158  
Clearwater, FL 33763  
727-210-2350  
[www.caahep.org](http://www.caahep.org)

### CoAEMSP

8301 Lakeview Parkway Suite 111-312  
Rowlett, TX 75088  
214-703-8992  
[www.coaemsp.org](http://www.coaemsp.org)

The program meets in a one day a week format on Tuesdays from 8:00 am to 5:00 pm (there is also at least one Thursday per month). The in-class content is supplemented with an on-line learning system so the student will also have significant content and assignments to complete via the internet. Approximately 750 hours of clinical is required in addition to the classroom time.

Classes will be held on site at the district's new Headquarters located at 2000 Salt River Road, St. Peters, Missouri.

Pretesting and interviews will be held in the current Training annex at 4141 Mexico Rd., St. Peters, MO. Students must have access to a computer and internet access with updated browser to complete course assignments.

### Pre-Requisites

To be considered for admission, students must:

- Be a licensed Missouri EMT
- Submit two letters of recommendation from employers or instructors
- Complete Human Biology (no lab required) at St. Charles Community College (or equivalent A&P class approved by program director) with a "C" or higher – official transcript required.
- Submit previous college transcripts
- Complete a written assessment (reading, math, EMT, anatomy & physiology, attitude) (**prior to the interview day**~\$26 non-refundable fee). Information to sign-up will be provided after the application is submitted.
- Submit a notarized course application by the program deadline
- Attend an admission interview

Candidates will be selected after review of each student's portfolio from above.

### Advanced Placement

SCCAD does not offer advanced placement for licensed health care personnel such as RNs or MDs. Military candidates may be eligible for advanced placement. During active duty or up to two years after honorable discharge, the holder of a valid EMT-Basic United States Armed Forces license may present their license and have their EMS knowledge, skills, and abilities assessed for advanced placement into the paramedic program. ALL program attendees must meet all program requirements.

## **Post-Admission Requirements**

After receiving a letter of provisional acceptance into the program, students must provide the following: *\*Note - Some findings may disqualify admission. Details related to these requirements will be provided in the provisional acceptance letter.*

- Be registered with the Missouri Family Care Safety Registry
- Criminal record check (Some convictions exclude participation in the program)
- Not appear on the OIG exclusions list
- Drug screen (Students will not be admitted for a positive drug screen that is not cleared by the medical review officer)
- Physical exam that indicates the student meets functional job requirements of a paramedic.
- Selected immunizations
- Proof of Health insurance

## **Clinical Content**

Presently field clinical sites are available at: St. Charles County Ambulance District, Christian Hospital EMS, Clayton Fire Department, Community Fire Protection District, Creve Coeur FPD, Florissant Valley FPD, Kirkwood FD, Maryland Heights FPD, Metro West FPD, Lincoln County Ambulance District, St. Charles City FD and West County EMS & Fire PD. Hospital clinical is done at St. Joseph Health Center and St. Joseph West, Barnes-Jewish St. Peters, and Progress West, St. Louis Children's, and Mercy Medical Center. Most field clinical phases must be completed at SCCAD.

Approximately 300 hours of hospital clinical and 450 hours of ambulance clinical are required for course completion. Students must also successfully complete a predetermined number of skills and competencies.

## **Program Completion**

Students who successfully complete all components of the program by specified deadlines and pass a summative exit examination will be eligible to take the National Registry of EMTs written and practical paramedic examinations. After the student passes both National Registry examinations, they will be eligible for licensure as a paramedic in the State of Missouri.

Graduates of the SCCAD paramedic program will also be certified in:

*Advanced Cardiac Life Support	*Pediatric Advanced Life Support
*Advanced Medical Life Support	*Pre-Hospital Trauma Life Support

## **Program Cost**

The tuition for the paramedic program is \$10,281. Tuition is divided between the three semesters of class. In addition to this, required software and textbook cost is approximately \$800.00. Students are responsible for purchasing their own books on line through recommended sites using **ISBN provided in acceptance letter.**

*\*Additional charges may apply if a student fails to complete all program requirements by deadline.*

## **Additional Information**

To learn more about our program, or to schedule an appointment to discuss paramedic education, contact Becky Price, Training Assistant at 636-344-7663. If you provide us with your name and contact information, we'll be sure to update you with relevant information about our program.

We appreciate your interest in becoming a paramedic and would love to talk to you about attending the paramedic program at *St. Charles County Ambulance District!*

**St. Charles County Ambulance District**  
**Pre-Admission Checklist**  
**2021-2022**

Applicant's Name: \_\_\_\_\_

**Items below are required to be considered for acceptance into our program.  
They must be turned in by the application deadline.**

Requirement	Date Received/Completed	Notes
Program Application—Notarized		
High School Diploma or GED (Required even if college student)		
Official College Transcripts (if applicable)		
<b>Missouri</b> EMT License (NREMT registration alone not sufficient)		
Human Biology Grade of C or greater** OR Meets A&P requirement (must be approved by Program Director***)		
Two Letters of Recommendation from an instructor, employer or supervisor		
Paramedic Pre-Admission test Completed <i>(prior to interview)</i>		

\*\*May be enrolled at time of application but preference given to those who have completed. No lab required.

\*\*\*Alternative college level A&P courses must be approved by the course program director prior to acceptance. The student may be required to submit a syllabus to determine whether the A&P class under consideration meets the program pre-admission requirements. Will **not** accept A&P I only as alternative – must have A&P I & II.

**After the Program Interviews**, we will notify students who are provisionally accepted into the program. **After** that time, those students are required to submit the additional requirements listed on the **post-admission** checklist. Details will be provided in acceptance letter.

**Pre-Admission Test Date/Time:** \_\_\_\_\_ **Interview Date/Time:** \_\_\_\_\_

If you are accepted into the Paramedic Program at St. Charles County Ambulance District, the following additional requirements must be met. Additional information will be provided by the Program Director regarding these requirements. Some criminal record, Family Safety Registry or drug screen findings may exclude you from the program. Failure to submit required materials in a timely matter will result in program disqualification.

## St. Charles County Ambulance District Post-Admission Checklist 2021

Applicant's Name: \_\_\_\_\_

**Required after Provisional Acceptance to Program. Details regarding these requirements will be provided in your acceptance letter. NO ACTION IS NEEDED UNTIL YOU ARE ACCEPTED.**

Requirement	Date Received/Completed	Notes
Functional requirement form signed by physician based on physical examination within 12 months of program start date.		<i>Will send form with acceptance letter</i>
Immunization Records Received:		
a. Documentation of a negative PPD skin test for tuberculosis within 12 months of the clinical start date (if positive, document negative chest x-ray and health screening)		
b. A mumps, measles and rubella (MMR) vaccination or antibody test	#1 #2	
c. Hepatitis B vaccination	#1 #2 #3	
d. Tetanus-Diphtheria-Acellular-Pertussis vaccination		Within 10 Years
e. Influenza vaccination (current season by middle of October – must have to start clinical)		
f. Varicella	#1 #2	
Proof of Current Health Insurance		
Current BLS for HCP CPR	Expires:	
MO EMTB	License #:	Expires:
Driver's License (Copy)	State:	Expires:
Criminal Record Check		<i>Information will be provided at orientation session.</i>
Negative Drug Screen		<i>Information will be provided at orientation session.</i>
Enroll in Missouri Family Care Safety Registry <a href="http://www.dhss.mo.gov/FCSR/">http://www.dhss.mo.gov/FCSR/</a>		<i>Will send information with acceptance letter</i>
O.I.G. Check Completed		<i>Completed by SCCAD</i>

**\*It is possible that COVID-19 vaccine will be required during the program if clinical sites mandate it.**

**Orientation Date & Time:** \_\_\_\_\_

# Program Information

## General

The SCCAD paramedic program meets on Tuesdays from 0800-1700 for a full calendar year beginning in August. In addition, there is at least one additional Thursday each month. The clinical internship involves approximately 750 hours and mandatory skills completion. Students must meet all program attendance requirements; and complete all class and clinical assignments with a grade of C or greater and pass an exit exam after all class and clinical is complete, by the designated deadline, to pass the program and be eligible to take the National Registry of EMTs certification examination.

Complete course policies, schedule and grievance procedures will be made available to students during the program orientation before the class begins.

## Program Tuition

Class fees:	\$10,281.00
Textbooks/Supplies:	Approximately \$800.00 (for 3 semesters) ~ Books are not included in tuition and are to be purchased by the students on-line ( <b>must use specific ISBN</b> ).

***\*This program is not a regionally accredited college or university. Students are not eligible for federal financial aid and this program cannot issue a 1098-T for tax reporting purposes.***

## Payment Schedule:

<b><i>1st Semester (Aug 2021):</i></b>	<b>\$3427.00</b> due at orientation prior to the start of first semester
<b><i>2nd Semester (Jan 2022):</i></b>	<b>\$3427.00</b> due prior to the first class of second semester
<b><i>3rd Semester (May 2022):</i></b>	<b>\$3427.00</b> due prior to the first class of third semester

***\*\* (With permission of the program director and after execution of a direct withdrawal payment agreement, a payment plan may be arranged that constitutes 3 payments of \$1000 prior to the first class of each semester (Aug/Sept, Jan, & May) and 10 payments of approximately \$730-\$810 due the other months. Payments are due usually by the fifth day of each month as outlined in the payment agreement.) ~ Students participating in the monthly payment plan will not be able to attend class if the payment is not received monthly as outlined by the direct withdrawal payment schedule.***

Course completion documents permitting NREMT certification examination will not be provided until the course fees are paid in full and all required course requirements are met.

**These fees do not cover the cost of National Registry of EMTs written and practical examination testing.**

**If a student is granted an extension to complete course work or clinical extending past the end of the program completion deadline, additional fees may be applied.**

## **Tuition Assistance**

**Private Loans:** Must obtain personal loan. This program is not eligible for federal financial aid.

**GI Bill®:** Contact program director for specific information (Program is eligible for Montgomery Bill and Post-911 funds). Students are responsible to check individual eligibility.

“GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government Web site at <https://www.benefits.va.gov/gibill>.

### **GI Bill® Payment**

Students eligible for program payment through the GI Bill® must provide the school with a certificate of eligibility or valid VAF 28-1905 in lieu of the initial payment. The student may attend class for up to 90 days while payment from the Veteran’s administration is pending. No penalties or late fees will be assessed to eligible students for late payment from the VA.

**Grants:** In the past, some students have received scholarships in varying amounts from the following sources:

David J. Wetter Jr. Scholarship (SCCAD)

Mike Hansen Scholarship (Awarded to Valedictorian and Salutatorian at end of program)

## **Student Withdrawal/Refund\***

Students may withdraw from the program at any time. Requests for withdrawal must be in writing. If a participant does not report for class or requests withdrawal in written form after the start of class, they are responsible for all fees associated with the program.

### **Refunds (per semester)**

<b>Withdrawal Date</b>	<b>Refund Amount</b>
Prior to first semester class start date	Full tuition refund less \$250.00 processing fee
Prior to second or third semester start date	Full tuition refund for dropped semester
Withdrawal within 3 weeks after semester start date	80% tuition refund
Withdrawal >3 weeks until 9 <sup>th</sup> week of semester	40% tuition refund

\*No refund on textbooks

*Refunds to veterans or eligible persons who fail to enter or fail to complete the course will comply with the Department of Veterans Affairs Regulations, 38 CFR 21.4255.*

## **Special Needs**

If you have a diagnosed disability that requires accommodation to successfully complete didactic, skill, field or clinical aspects of this class, notify the primary instructor after you are accepted but before the class begins to discuss possible accommodations.



## **Accreditation and College Affiliation**

SCCAD is accredited by the Missouri Dept of Health & Human Services, EMS Bureau:  
PO Box 570  
Jefferson City, MO 65102-0570  
573-751-6356  
Accreditation #18305T6, Exp. April 30, 2021 (*\*Renewal submitted and awaiting BEMS approval*)

The St. Charles County Ambulance District Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

Commission on Accreditation of Allied Health Education Programs:  
25400 US Highway 19 N, Suite 158  
Clearwater, FL 33763  
727.210.2350  
[www.caahep.org](http://www.caahep.org)

CoAEMSP:  
8301 Lakeview Parkway Suite 111-312  
Rowlett, TX 75088  
214-703-8992  
[www.coaemsp.org](http://www.coaemsp.org)

## **St. Charles Community College**

Presently, SCCAD has an agreement for services with St. Charles Community College. Students who pass the SCCAD paramedic program and license as a paramedic are eligible for credit toward an associate degree at SCCC (contact program for further information). *It does **NOT** make the student eligible for federal financial aid when enrolled in the paramedic program at SCCAD.*

## **Advanced Placement**

SCCAD does not offer advanced placement for licensed health care personnel such as RNs or MDs. Military candidates may be eligible for advanced placement. During active duty or up to two years after honorable discharge, the holder of a valid EMT-Basic United States Armed Forces license may present their license and have their EMS knowledge, skills, and abilities assessed for advanced placement into the paramedic program. ALL program attendees must meet all program requirements.

**THIS PAGE LEFT BLANK**

**APPLICATION FOLLOWS**



**St. Charles County  
Ambulance District**

---

Training Center

**Application for Admission**  
**St. Charles County Ambulance District**  
**2021-2022 Paramedic Program**  
*(Submit this form)*

Full Legal Name: \_\_\_\_\_  
First Middle Last

Permanent Address: \_\_\_\_\_  
Street City State Zip Code

Telephone: \_\_\_\_\_  
Primary Contact Secondary Contact Work (if applicable)

Email Address: \_\_\_\_\_

**Academic Record**

Type	School Name/Address	# of Years	Degree/ Diploma	Major	Date Graduated Month/Year
High School or GED					
College					
EMT Training					
Other					

**Work Experience**

Employer	Position	Dates employed

**The deadline to submit a completed application to the 2021-2022 Paramedic Program at St. Charles County Ambulance District is Monday, June 7, 2021 by 4pm.**

**Application for Admission**  
**St. Charles County Ambulance District**  
**2021-2022 Paramedic Program**  
*(Submit this form)*

St. Charles County Ambulance District does not unlawfully discriminate on the basis of age, race, national origin/ancestry, color, sex, religion/creed or handicap/disability. St. Charles County Ambulance District Paramedic Program operates in accordance with applicable equal opportunity laws in the consideration for admission.

**I hereby certify that, to the best of my knowledge, the information furnished on this application is true and complete without evasion or misrepresentation. I understand that if this information is found to be untrue or misrepresented, it will be sufficient cause for rejection or dismissal from the Paramedic Program.**

**I hereby certify that I have not been convicted of or pled nolo contendere (no contest) to a felony nor do I have any pending felony charges against me. I further acknowledge that I have a continuing duty to notify the Primary Instructor of the Paramedic Program at St. Charles County Ambulance District if, while I am a student of in the Program, I am charged with, plead nolo contendere to, or am convicted of a felony.**

\_\_\_\_\_  
**Applicant's Signature**

**Date** \_\_\_\_\_

State of Missouri  
County of St. Charles (ss)

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_, known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

\_\_\_\_\_  
Notary Public

{Notary Seal}