



IMPERIAL VALLEY COLLEGE
Health & Public Safety Emergency Medical Services
380 E. Aten Road, Imperial, California 92251 Phone: (760) 355-6483



PARAMEDIC PROGRAM

Paramedic Applicant:

Thank you for your interest in the Paramedic Program at Imperial Valley College. Attached is the application packet. Please complete the information and return it with the required attachments to the EMS Office. Applications will be open and accepted **mid January through July 3rd**. Completed applications submitted will be reviewed and selections for the next paramedic program will be made by the end of July.

The IVC Paramedic Program will begin in the fall semester (August),

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APPLICATION

Name: _____
Last First Middle

Address: _____
Street

City State Zip

Telephone: _____ Email: _____

IVC Student #: G00 _____

Employer Name: _____

Employer Address: _____
Street

City State Zip

Telephone: _____ Email: _____

Current Level EMS Certification: _____ Years of Experience: _____

Certification/License #: _____

School(s) attended for EMS Training: _____

Date of first EMT-I/EMT-II Certification: _____

Social Security #: _____ Date of Birth: _____

Emergency Contact: _____
Name Contact Phone #

Street

City State Zip



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Estimated Cost Paramedic Program*