



northeast

MISSISSIPPI COMMUNITY COLLEGE



Continuing Education

Workforce Training

EMT-Basic TRAINEE APPLICATION

Class Name **EMT-Basic Fall 2009**

First Name _____ MI _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Social Security # _____ - _____ - _____ County of Residence _____

Date of Birth ____/____/____ Gender Male Female

Telephone Day _____ Evening _____

Cell Number _____

Contact in case of an emergency Name _____ Phone _____

Are you 18 years of age or older? YES: _____ NO: _____

Previous Health Occupations Training _____

Previous Health Occupations Work Experience _____

Racial/Ethnic Group (Please choose only one)

- Asian
- American Indian/Alaska Native
- Hawaiian Native/Pacific Islander
- Black/African American
- White/Caucasian
- Hispanic/Latino

Level of Education (Please choose only one)

- Less than High School
- Bachelor Degree
- High School/GED
- Graduate or Professional Degree
- Some College without Degree
- Associate Degree

Employment Status Employed Unemployed Retired
 Employment Type Full-time Part-time Seasonal
 Is your employment temporary? Yes No

I attest the information provided above is true and accurate. I understand any falsification of the information invalidates the application.

Date: _____ Signature: _____

Return Complete form to:

**Continuing Education Office
 Northeast Mississippi Community College
 101 Cunningham Boulevard
 Booneville, MS 38829
 Fax: (662) 720-7896
 E-mail: pgcolson@nemcc.edu**

HealthCare Criminal History

Background Affidavit

State of Mississippi, County of _____

Before me, a Notary Public in and for the County and State aforesaid, and personally appeared the undersigned _____, who, after being by me first duly sworn did state upon his/her oath as follows:

That the affiant is currently a student in the EMT Basic Program at Northeast Mississippi Community College.

That the affiant has not been convicted of or plead guilty or nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offence listed in Section 45-33-23(g) Mississippi Code of 1972, child abuse, arson, grand larceny, burglary, gratification of lust, aggravated assault, or felonious abuse and/or battery of a vulnerable adult.

That the affiant has not been convicted of or pleaded guilty or nolo contendere to other crimes which his/her employer (1) has determined to be of a nature and/or frequency as to be disqualifying for employment; (2) has adopted such as part of its written policies; and (3) has fully disclosed of such to the affiant prior to his/her requirement during his/her employment, in addition to this affidavit.

Further, the affiant sayeth not.

Name of Affiant (printed)

Signature of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME, this the _____ day of _____, 20_____.

Signature of Notary Public

My Commission Expires