

American River College
Paramedic Program
Employer Engagement Form (EEF)

Purpose of the Form

The American River College Paramedic Advisory Committee continues to support the program prerequisite/corequisite of EMT experience. Recently, the Medical Director agreed to reduce the overall EMT experience to one year and or 200 patient contacts (911 preferred). If by the application deadline the candidate has yet to achieve the required patient contacts, the program may still accept the candidate contingent on submission of this signed form along with the program application. Acceptance into the program will remain contingent upon successful submission of patient contact data prior to the end of the first semester or PMED 115. To help secure this timeline, the paramedic program is seeking the support of the candidate's EMS provider/ employer. The tracking of patient contacts is ultimately the candidate's responsibility; however, this form demonstrates an awareness of and willingness by the candidate's employer to support and engage the candidate towards meeting/exceeding the EMT contact requirement. Please contact Dr. Grant Goold @gooldg@arc.losrios.edu if you have any questions.

Paramedic Candidate Name:

Current Mailing Address:

City:

Zip Code:

State:

Telephone #: ()

School email:

Personal email:

Program Year:

Current EMT experience in months at the time of application:

Current EMT experience in patient contacts at the time of application:

Scheduled Date for EMT Experience Compliance **(May1st, 2024)**

Candidate Signature:

Date:

Employer Name:

Employer Signature:

Date:

Employer Contact: