



Department of Health Professions Paramedicine Program Application for Fall 2021 Admission

Dear Paramedicine Program Applicant:

Thank you for your interest in the Health Professions programs at Missoula College (MC) of the University of Montana (UM). An internal program application specifically for Paramedicine is required. Students apply each spring for fall admission. Included are 3 pages of detailed instructions to go with the online portion of the application as well as a healthcare experience verification form. As you prepare your application for submission, there are several items to consider.

The program application process is your opportunity to distinguish yourself as an applicant to the Paramedicine Program. Applications will be evaluated for minimum eligibility and then ranked on the categories listed below, with the opportunity for additional points as described.

- **Online Application:** see next page for details
- **Cover Letter:** tell us why you are applying, and what makes you stand out as an applicant.
- **Prerequisites / GPA:** see next page for details
- **Interview:** Applicants meeting the minimum standards will be invited to an interview. Scheduling will be handled by the Paramedic Program Director, with interviews conducted by a panel consisting of the Program Director, Chair of Health Professions, Medical Director or his designee, a paramedic and an EMT.
- **Two letters of reference**
- **Additional credit** will be granted for experience in the medical field.
- **Basic Emergency Medicine written exam / practical assessment** (to be held after application deadline).

Eligibility to Apply:

- **GPA:** A minimum GPA of 2.75 in most recent 20 college/university credits completed is required (all college/university coursework taken since high school is reviewed). This will include the pre and co-requisites.
- **PRE and COREQUISITES (see next page):** Successful completion of five courses and current NREMT certification are required to fulfill the requirements of the Associate of Applied Science degree. While the EMT must be completed before entering the program, the remaining 5 courses can be taken at any time before program completion. However, applicants are STRONGLY encouraged to complete these 5 courses, and in particular Basic Anatomy (BIOH 108 or BIOH 104).
- **NREMT (National Registry EMT Certification):** Applicant must have their EMT National Registry in order to apply.
- **CERTIFICATE:** Applicants to the certificate-only program, which will enable students to test for their National Registry Paramedic certification without completing the full AAS program, must complete this application process.

Application Deadline – April 23, 2021: All application data requirements and materials must be uploaded in your online application no later than Friday, April 23, 2021. We hope this information will be helpful to you. We are eager to read your application and will provide feedback to you in a timely manner. If you have questions or concerns, please contact Dan Funsch, Program Advisor at (406) 243-7851 or Dan.Funsch@umontana.edu.

Sincerely,

David McEvoy, MS, NRP & CC Paramedic
Paramedicine Program Director

Dan Funsch, MS, RT(R)
Paramedicine Program Advisor

PRE AND COREQUISITE COURSES

Course Title	Credits
BIOH 108 (or 104) - Basic Human Anatomy	4
COMX 115S - Interpersonal Communications	3
MATH 105 – Contemporary Math (or higher)	3
WRIT 101 – Writing/English Composition	3
AHMS 144 - Medical Terminology	3
Emergency Medical Technician (NREMT)	

IMPORTANT NOTES

- Pre-requisite science courses must be completed within 5 years of application submission AND with a maximum of two attempts during a 5-year period. Grades WP (withdrawal pass) and WF (withdrawal fail) count as an attempt. The most recent grade earned is used to calculate the pre-requisite GPA.
- Writing and Math pre-requisite grades older than 10 years may possibly be renewed for our application purposes by taking placement exams and scoring above our required course levels. If you are in this situation, please contact Dan Funsch Dan.Funsch@umontana.edu.
- College Level Entrance Program (CLEP) exam scores will attributed a grade of “C” only.
- Advance Placement (AP) exam scores without an assigned letter grade will be attributed a grade of “C” only.

MAY BE APPLICABLE TO YOU:

- **Admission / Readmission to Missoula College:**
 - **Admission:** If you have never been admitted to University of Montana-Missoula, Missoula College, or Bitterroot College, you must complete an [application for admission to Missoula College](http://admissions.umt.edu/apply/missoula-college). (<http://admissions.umt.edu/apply/missoula-college>)
 - **Readmission:** If you attended University of Montana-Missoula (4-yr campus) or Missoula College or Bitterroot College over 24 months ago, you must submit a [Readmission Application](https://www.umt.edu/registrar/students/Readmission%20Information.php) and check Missoula College as your campus. (<https://www.umt.edu/registrar/students/Readmission%20Information.php>)
- **Changing from UM-Missoula Mountain Campus to Missoula College Campus:**
 - Complete the [Intra-Campus File Transfer Form](https://www.umt.edu/registrar/PDF/intra%20Campus%20transfer%20form.pdf) (<https://www.umt.edu/registrar/PDF/intra%20Campus%20transfer%20form.pdf>); **and**
 - Submit the form to UM Admissions in the Gilkey Center or email it to admiss@umontana.edu.

(continued on next page)

SUBMISSION REQUIREMENTS -- please follow instructions exactly:

Application deadline Friday, April 23.

❑ **APPLICATION - online 2021 application for Paramedicine**

- **Complete the online application**, requesting contact information, demographic data, a list of all colleges/universities attended, and a list of your in-progress courses.
- **You will need to create an account in Submittable** -- the software used for this portion of the application process. After clicking this link, create your account: <https://mchealth.submittable.com/submit>.

❑ **COVER LETTER:** upload within online application

❑ **MEDICAL EXPERIENCE:** part of online application

Please include volunteer work and job shadow experiences. All are important.

❑ **PROFESSIONAL CERTIFICATION(S) / LICENSE(S) – INCLUDING NREMT:** upload within online application

❑ **TWO LETTERS OF REFERENCE:** upload within online application

❑ **JOB SHADOW FORM:** upload within online application

See last page of this document for the form, which must be completed by you and signed.

❑ **TRANSCRIPTS PLUS:** upload as part of online application

- **Unofficial transcripts** from **ALL** colleges and universities attended. **This is regardless whether the school's transfer courses show on another of your transcripts or if UM or Missoula College or Bitterroot College has official transfer transcripts on file for you.**
- **For courses in progress**, please enter them in the designated online portion of the application.
- **If applicable, documentation of a course waiver or approved course substitution** from Admissions or from Dan Funsch, Paramedicine Program Advisor.

Paramedicine Verification of Healthcare Experience (EMT, CNA, HCA, etc)

Upload this form for inclusion with your online application to the Paramedicine Program.
Please complete legibly. (Copy this form to document additional experience if needed.)

APPLICANT NAME _____
(please print)

EXPERIENCE #1:

Your Position Title _____ Your Credentials _____

Organization Name _____ Organization Phone _____

Organization Address _____

Supervisor's Name _____ Supervisor's Title _____

Supervisor's Email Address _____

Time Period (Start /End Dates) _____ # of Hours Worked _____

Description of Roles & Responsibilities, including Patient Care:

May we contact your supervisor? YES NO

EXPERIENCE #2:

Your Position Title _____ Your Credentials _____

Organization Name _____ Organization Phone _____

Organization Address _____

Supervisor's Name _____ Supervisor's Title _____

Supervisor's Email Address _____

Time Period (Start /End Dates) _____ # of Hours Worked _____

Description of Roles & Responsibilities, including Patient Care:

May we contact your supervisor? YES NO

SIGNATURE _____ DATE _____