

# Admissions Requirements for the Loyola University Medical Center Paramedic Program Spring 2025



Please read this entire packet carefully and retain for your records

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**Paramedic I-II-III**  
Fire 2278-2279-2280

**THIS PACKET IS ONLY FOR STUDENTS INTERESTED IN  
LOYOLA UNIVERSITY MEDICAL CENTER**

**Beginning Spring 2025 through Fall 2025**

**Application deadline:**

**August 25, 2024 at 3 p.m.**

**Classes, Clinicals, and Internships run January 2025 through December 2025**

**PLEASE MAINTAIN A PERSONAL COPY OF THIS PACKET FOR FUTURE REFERENCE**

**Note:** Students are not accepted into this program until they have received an official acceptance letter from Loyola University Medical Center EMSS. Completion of Health Requirements, CPR completion, criminal background checks, and proof of insurance is an independent activity to prepare for entrance into health programs at College of DuPage and/or participation in clinical sites within health programs. Funds paid to Edward Corporate Health or to a personal health care provider/source, [CastleBranch.com](http://CastleBranch.com), insurance companies, and funds used towards CPR completion are not eligible for any sort of refund from College of DuPage if the required course is not successfully completed.

## **PROGRAM OVERVIEW**

College of DuPage (COD) offers Paramedic training through Loyola University Medical Center, Edward Hospital, Good Samaritan Hospital and Loyola University Medical Center Emergency Medical Services System (EMSS). These Paramedic training programs utilize the U.S. Department of Transportation's National Education Standards and are approved to offer Paramedic training by the Illinois Department of Public Health (IDPH).

The hospitals have been designated Emergency Medical Services System resource hospitals by the State of Illinois. This designation specifies certain responsibilities in the delivery of pre-hospital care. Among these are the training and education of Paramedic personnel. Loyola University Medical Center's Paramedic programs starts in January of each year and is one year in length. Registration is through College of DuPage with classes and clinical rotations held at the hospital.

## **PROGRAM INFORMATION DISCLAIMER**

This program information packet is published for that purpose; however, the information in this packet is not to be regarded as an irrevocable contract between the student and the program. The program reserves the right to change, at any time, without notice, requirements, fees and other charges, curriculum, course structure and content, and other such matters as may be within its control, notwithstanding any information set forth in the program information packet in accordance with the COD policies and procedures.

## **PROGRAM & COURSE DESCRIPTION**

The Paramedic Certificate Program is composed of three courses. The [certificate requirements](#) and [course descriptions](#) for the Paramedic program can be found in the Course Catalog under the Fire Science discipline.

## **ATTENDANCE**

Class attendance is **mandatory**. Students are expected to arrive at class on time and not leave early. Unexpected or unforeseen circumstances can be discussed with the Program Director. Students who know in advance that they are going to be late or miss classes must notify their instructor. Paramedic program students can miss only a certain number of classes to still be eligible to sit for certification exams. Students must also maintain a minimum of 80% on each exam, practical, and clinical rotation to remain in the Paramedic program.

## **TEXTBOOKS**

Books will be discussed at orientation. Also, there will be several online learning tools utilized both in the classroom and independently. In the best interest of the student, the recommendation is for each student to have the ability to utilize their own computer, laptop, or tablet.

## **UNIFORM POLICY**

Loyola University Medical Center Paramedic Program requires the student to wear a paramedic program uniform and will discuss the uniform policy at orientation.

## **TUITION/FEES/FINANCIAL AID**

The paramedic program consists of 36 semester hours of college credit at the [prevailing tuition rate](#). In addition to the tuition, **There is a non-refundable Lab Fee payable to Loyola University Medical Center upon acceptance into the program. This fee is separate from tuition.** College of DuPage payment policy states payment will be due immediately following registration. If you are unable to pay the amount in full, you must sign up for the payment plan offered by the college. If you are expecting financial aid or other assistance, you may be able to sign up for a deferred payment plan. If you have questions regarding the payment plan or the payment policy, please contact the Cashier's office at (630) 942-2206. The College of DuPage reserves the right to drop students for non-payment of tuition.

Financial Aid is available to any eligible student enrolled in the college for six or more eligible credits. Grants, loans, on-campus employment, veteran's grants and scholarships are aid options available to help students meet their education expenses. If you are planning on applying for financial aid and have not already done so, please [visit our website](#) or contact the Financial Aid office at (630) 942-2251. It can take 6-8 weeks for processing, so if you have not already completed your [FAFSA form](#) you may need to sign up for the standard payment plan and be reimbursed once your financial aid is processed.

If you are a veteran and are planning to use veteran's benefits, please [visit our website](#) and the [United States Department of Veteran's Affairs](#).

If a company will be paying for your tuition or you have a chargeback agreement from another community college, please [download our Third Party Billing/Chargeback form](#) or speak with a representative at (630) 942-2377.

Students enrolled in the Paramedic program needing to verify full-time status (medical or insurance) are considered full time students. To receive a letter stating full-time status, visit the Records office (SRC 2015). A request form needs to be completed. There is a \$5 processing fee for this request, payable by cash or check. This request takes five to 10 days to process. For additional questions, call (630) 942-2431 or (630) 942-3022.

### **NON-DISCRIMINATION STATEMENT**

The College prohibits discrimination in its admissions, employment, and educational programs or activities on the basis of race, color, sex, religion, creed, national origin, age, ancestry, marital status, sexual orientation, gender identity and expression, arrest record, military status or unfavorable military discharge, citizenship status, and physical or mental disability. The College will protect an individual's right to express their viewpoint or opinion, so long as it does not violate State or Federal law and is not detrimental to the College.

This Policy against discrimination applies throughout all College environments, whether on campus, at work assignments off campus, at College-sponsored social functions, or otherwise.

Procedures to facilitate the College's prohibition of discrimination will be promulgated consistent with the Policy. (Board Policy 20-5).

### **STUDENT E-MAIL POLICY**

College of DuPage will send all official communications to you through your official COD email (dupage.edu). You will no longer be able to use a preferred email account. You do have the option to forward these communications to a personal email account if you wish.

Check out your COD email to get the message about:

- Official COD communications
- Financial aid communications
- Petition to graduate
- Transfer credit evaluation
- Prerequisite proof Sensitive
- FERPA-related communications
- Transcript order Important messages from instructors

[https://cod.edu/student\\_life/resources/information\\_technology/email/email-policy.aspx](https://cod.edu/student_life/resources/information_technology/email/email-policy.aspx)

### **PROGRAM PREREQUISITES**

**Required:** Illinois licensed Emergency Medical Technician (EMT) and acceptance into the paramedic program. FIRE 2271 with a grade of B or better or equivalent. **Preferred/Not Required:** ANAT 1500 with a grade of C or better or equivalent, HLTHS 1110 with a grade of C or better, or equivalent and ENGLI 1101 with a grade of C or better, or equivalent or consent of instructor. **(see statement on page #9).**

### **CRIMINAL BACKGROUND CHECK INFORMATION**

All health care workers and student health care workers are required to undergo a criminal background check in order to work in a clinical setting. A student with a positive background check containing disqualifying conditions as defined by Federal and State law will not be allowed to enter the program. A student with a positive background check containing disqualifying conditions as defined by Illinois State Law ([225ILCS46/25](#)) and 77 Ill Adm. Code 955 Section [955.160](#) will not be allowed to enter the clinical portion of this program, thus preventing the student from obtaining mandated certification and/or licensure.

**NOTE: You may have been convicted and not sent to jail.** People are often fined or given probation or conditional discharge rather than jail time, but these are still considered convictions. If you are unsure as to whether an arrest resulted in a conviction, contact the county in which you were arrested and speak to a representative in the Circuit Clerk's office, State's Attorney's office or your attorney.

**Criminal background checks only need to be completed once accepted into the paramedic program.**

### **MISCELLANEOUS INFORMATION**

For additional information about any programs at COD, consult the college *Catalog*, the *Class Schedule*, or visit [www.cod.edu](http://www.cod.edu). For questions specifically concerning the [Paramedic Program](#), contact Ryan Lambert, Fire Science Program Manager at (630) 942-2107 or [lambertr835@cod.edu](mailto:lambertr835@cod.edu)

### **POLICY FOR PROFESSIONAL CONDUCT AT CLINICAL SITES**

Please visit the EMS/Fire Science Resource Page: <https://www.cod.edu/academics/programs/fire/health-requirements.aspx> for the Professional Conduct Policy.

### **HEALTH REQUIREMENTS**

Once accepted into the Paramedic program, the student will be required to meet the health requirements (including mandatory immunizations) of the program prior to the first day of class. Flu immunization will be required in the fall when it becomes available. Failure or inability to follow health requirement procedures will disqualify the student from participation in the program. **Details to follow once accepted by the program. Please do not complete these requirements until instructed to do so.** Students are responsible for all costs involved. Health insurance is required during the program and may be available through the college.

### **ACCREDITATION**

The Loyola University Medical Center Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

To contact CAAHEP:

9355 - 113th St. N, #7709  
Seminole, FL 33775  
727-210-2350  
[www.caahep.org](http://www.caahep.org)

To contact CoAEMSP:

8301 Lakeview Parkway Suite 111-312  
Rowlett, TX 75088  
214-703-8445  
[www.coaemsp.org](http://www.coaemsp.org)

## **FUNCTIONAL JOB ANALYSIS/TECHNICAL STANDARDS- PARAMEDIC**

### **Qualifications**

To qualify for EMS licensure, an individual must successfully complete a State-approved course and achieve full competency in cognitive, affective, and psychomotor domains. In addition, the individual must achieve a passing score on the National Registry of Emergency Medical Technicians (NREMT) licensure examination.

EMS personnel must be at least 18 years of age. The knowledge, skill, and responsibility required of Paramedics demand a minimum of a high school education or equivalent.

EMS personnel must possess the ability to:

- communicate verbally, in person and via telephone/radio in English
- lift, carry and balance up to 125 pounds (250 pounds with assistance)
- interpret written, oral, and diagnostic instructions
- use good judgment, set priorities, and anticipate issues in high-stress situations
- work effectively in an environment with loud noises, chaos, and flashing lights
- function efficiently throughout a 24-hour shift, including when awoken from sleep
- act calmly under time constraints, managing time effectively
- read and understand English language manuals
- interview patient, family members, and bystanders
- document all relevant information
- communicate effectively with coworkers and hospital staff
- follow and apply oral and written directions
- stay organized and meet deadlines
- demonstrate a desire to care for all people and be culturally competent
- demonstrate ability to focus and provide attention to detail
- recognize an emergency
- apply knowledge in an emergency
- make sound critical-thinking decisions under duress
- maintain self-discipline and emotional stability
- understand the principle of “first do no harm”
- relate to and communicate with diverse clientele of all ages
- remain flexible in ever-changing situations
- uphold ethical standards, morals, and professionalism under pressure
- draw valid conclusions and defend them as necessary
- apply best practices in an unstructured environment
- remain safe and take measures to avoid errors
- be assertive, assume a leadership role, and direct a crew
- understand personal/professional strengths, weaknesses, and limitations
- work efficiently and accurately in time-sensitive situations
- accept accountability for self and crew
- advocate for patients and loved ones
- maintain sound mental, emotional, and physical health

EMS personnel must possess manual dexterity and prove the ability to perform all tasks related to quality patient care. The ability to bend, stoop, and crawl on uneven terrain and ability to withstand varied environmental conditions such as extreme heat, cold, and moisture is vital. The ability to work in low light, confined spaces, and other dangerous environments is required. Paramedics must be able to function in chaotic, noisy environments.

## **Description of Tasks**

- Receives call from dispatcher, responds appropriately to emergency calls, reads maps to use most expeditious route and observes traffic ordinances and regulations.
- Determines nature and extent of illness or injury, takes pulse, blood pressure, visually observes changes in skin color, auscultates breath sounds, makes determination regarding patient status, establishes priority for emergency care, renders appropriate emergency care; administers intravenous medications or fluid replacement.
- Use equipment such as a defibrillator & electrocardiograph; performs endotracheal intubation to open airway and ventilate patient; calculates drug dosages; applies BSI, splints and bandages.
- Assists in lifting, carrying, and transporting patient to ambulance and to a medical facility.
- Reassures patients and bystanders, utilizing therapeutic communication techniques.
- Extricates patient from entrapment, assesses extent of injury, uses prescribed techniques and appliances, radios dispatcher for additional assistance or services, provides light rescue service if required, provides additional emergency care following established protocols.
- Complies with regulations in handling the deceased, notifies authorities, and arranges for protection of property and evidence.
- Determines appropriate facility to which patient will be transported, reports nature and extent of injuries or illness to the facility, asks for direction from hospital physician or ECRN.
- Observes patient in route and administers care as directed by physician or ECRN or according to published protocol.
- Performs detailed/organized patient assessment; determines a clinical impression.
- Applies critical thinking skills; develops and executes care plans; reassess patient and situation.
- Reports verbally and in writing concerning observations about the patient; patient care at the scene and in route to facility; aids emergency staff as required.
- Maintains familiarity/competency with all specialized equipment.
- Replaces supplies, sends used supplies for sterilization, checks all equipment for future readiness, maintains ambulance in operable condition, ensures ambulance cleanliness and orderliness of equipment and supplies, decontaminates vehicle interior, determines vehicle readiness by checking oil, gasoline, water in battery and radiator and tire pressure.
- Performs drug calculations in emergency situations.
- Acts ethically with empathy, integrity, and compassion; maintains confidentiality.
- Behaves consistently in the nature of an adult learner and of a professional healthcare provider.

### **NOTES TO APPLICANTS:**

*Completion of the steps of the application process in an organized and complete manner is an example of one's ability to follow directions and to give attention to detail. These abilities are crucial in emergency care of the sick and injured.*

*In addition, the application process is an exercise that requires meeting deadlines and following through on tasks. Maturity, accountability, and self-motivation are crucial to success in any challenging endeavor, such as this Paramedic program. Please read the application instructions thoroughly and complete the required steps accordingly.*

*After reading the application in its entirety, ask questions, to ensure that you are considered a top candidate during the selection process.*

*Finally, please make certain to use personal insight when carefully reading the above lists of abilities and tasks to ensure that you can fully meet program and career expectations. If you have reservations, please talk with the Fire Science Program Manager Ryan Lambert, (630) 942-2107 or [lambertr835@cod.edu](mailto:lambertr835@cod.edu) or college career counselors.*

If selected into the Loyola University Medical Center Paramedic Education Program, the student will be responsible to: complete mandatory health requirements, apply for a background check, purchase textbooks, pay a lab fee, and obtain uniforms for the program.

If the student successfully completes the Loyola University Medical Center Paramedic Education Program, they will be eligible to test for National Registry of EMT's (NREMT) Certification, and upon successful completion, apply for State of Illinois Licensure. The student is responsible for all fees and scheduling associated with these processes.

### **OCCUPATIONAL RISKS DISCLOSURE**

Occupational risks related to the Paramedic profession include infectious disease exposure, assault and battery, accidental injury, lifting injuries, sprains and strains, behavioral health issues, sleep disorders, hazardous materials exposure, hyperthermia and hypothermia, extreme stress, and worsening of chronic health issues. This is not meant to be an all-inclusive list.



## Loyola University Medical Center — 2025 Paramedic Academy

Dear Applicant:

I would like to thank you for your interest in the Loyola University Medical Center Paramedic Academy! The Paramedic field, as well as the program, is a challenging one and requires some planning. As such, below is some basic information regarding the program.

The next Paramedic Academy class is scheduled to start January 7, 2025, and will run until the middle of December 2025. Classes will be held at **Loyola University Medical Center (LUMC) in Maywood** on Tuesdays, Wednesdays, and Thursdays from 9:00 a.m. to 5:00 p.m. A required deposit of Lab Fee is due upon acceptance to the program, which covers all textbooks, Chromebook, specialty courses, lab fees, initial uniform. (Candidates are responsible for parking and licensing exam fees.)

Preadmission testing sessions will be held in the EMS Classroom at Loyola University Medical Center. Applicants must register for **ONE** of the following testing sessions:

- Monday, September 9, 2024 9:00 a.m.
- Monday, September 9, 2024 1:00 p.m.
- Tuesday, September 10, 2024 9:00 a.m.
- Tuesday, September 11, 2024 1:00 p.m.

To schedule, please call the Loyola EMS Office at 708-327-2547 **starting** September 2, 2024.

Testing will be limited to 3 hours per session, and consist of the following:

- Standardized Reading Comprehension
- Math / Mechanical Aptitude
- Basic EMT Knowledge

**College of DuPage will inform us if you have submitted a complete application packet and met all requirements within two weeks from the application deadline.**

Applicants who have submitted a complete application packet **AND** meet or exceed the mean score on their preadmission exams will be invited to interview with the Paramedic Academy admissions board. A decision will be made as to who is accepted into the program shortly after.

We're excited to extend this opportunity, and look forward to getting to know you throughout the application process!

If you have any questions, please do not hesitate to call me directly at 708-327-2533.

Sincerely,

A handwritten signature in black ink, appearing to read "Joshua Hintz". The signature is fluid and cursive, written over a white background.

Joshua Hintz, A.A.S, CCEMT-P, EMT-P  
Lead EMS Instructor, Emergency Medical Services (Pre-Hospital)  
Licensing/CE, Emergency Medical Services (Pre-Hospital)  
Loyola University Medical Center  
Emergency Medical Service System



## **LOYOLA PROGRAM PREREQUISITES**

To qualify for a position within the Loyola University Medical Center Paramedic Education Program, **the applicant must:**

1. Be at least 18 years old
2. Provide a copy of a current State of Illinois EMT License (or proof of passing the NREMT licensure exam)
3. Provide transcripts from the highest level of education completed (high school, Associates, Bachelors)
4. Provide a current healthcare provider CPR card
5. Provide a copy of a health insurance card (with **applicants** name listed or proof of insurance document)
6. Provide a copy of a valid IL driver's license
7. Provide proof of military service, if applicable; honorable discharge paperwork required for points.
8. Provide proof of working with a provider agency within our EMS System, if applicable.
9. Agree to the sharing of the above information with Loyola University Medical Center Paramedic program personnel.
10. Be offered a seat/position in the program

Submit copies of the above along with the completed application by the application deadline to the designated offices as described in the Application Steps on pages 10-11.

### **Preferred/Not Required:**

1. Have completed or be enrolled in an Anatomy & Physiology course (COD Anatomy 1500 or equivalent or 1551/1571 **and** 1552/1572) with a grade of 'C' or better within the last 10 years. **(see statement below) \***
2. Have completed or be enrolled in a Biomedical Terminology course (COD HLTHS 1110 or equivalent) with a grade of "C" or better within the last 10 years. **(see statement below) \***

**\*These previous requirements are now preferred for the 2025 program. However, if one or both courses are available during the Spring or Summer 2024 terms, students are strongly encouraged to complete them.**

**Note: References (pages 19-20) and background checks may be requested at a later date and are not part of the application submission.**

### **Loyola Program Recommendations**

A minimum of six months of work experience as an EMT or related healthcare experience by the deadline date is not required, but **strongly recommended**.

### **MEDICAL ISSUES, INJURY, ILLNESS, EXPERIENTIAL LEARNING**

Loyola does **NOT** accept the following during consideration of admissions into the program or as reason to omit certain sections/labs/clinical/field experiences from the students overall requirements:

- Experiential learning/Life experiences
- The transfer in of credits from a previously attended paramedic program
- An "automatic" seat in the program if previously excused for the following:
  - o Pregnancy
  - o Illness
  - o Injury

If a student is excused from the program due to the above, non-academic reasons, the student must submit a new application and sit through all aspects of the admissions process. No automatic seats will be granted to any student or applicant.

## LOYOLA PARAMEDIC APPLICATION STEPS:

*It is the applicant's responsibility to ensure that all material listed below have been completed and received by 3 p.m. on August 25, 2024. Please retain a copy of this packet for your records.*

- \_\_\_\_\_ 1. If you have not been admitted to College of DuPage, please complete the **non-refundable \$20** [College of DuPage General Admissions Application](#) online. **This application is for general admissions to College of DuPage only; it is not an application to the Public Services Fire Science Limited Enrollment Paramedic program.**
  
- \_\_\_\_\_ 2. To ensure that all of your eligible credits are evaluated towards the admission requirements, turn in **ALL** official Transcripts from institutions that you have attended. Immediately:
  - a. Submit your official transcript(s) to **College of DuPage, Office of Student Records**. *If College of DuPage is the only institution you have attended, you do not need to request official transcripts.*
  
  - b. Verify receipt of your transcript(s). Log into myACCESS account, click on 'myACCESS for Students', select '**My Profile**'. The receipt status of your transcript will be listed under '**Transcript Institutions**'.

NOTE: If you have an international transcript from high school or college, it must first be evaluated. Please visit the following website <https://www.cod.edu/records/transcript-evaluation.aspx> for details.

- \_\_\_\_\_ 3. Complete the **non-refundable \$25** [Paramedic Program Limited Enrollment Application](#) online.
  - Log into [MyAccess](#) for Students
  - Near the bottom of the MyAccess Student Menu/Screen, locate Health Careers Applications
  - Then select Fire Science Applications
  - Agree to Statement of Understanding
  - Confirm Demographic Information
  - Select Paramedic Certificate for the program you are applying for
  - Term: Spring 2025
  - Select Loyola as program
  - Be sure to complete process and submit payment

**Once term is selected and application submitted, you may not change the term or program.**

***If you do not have a credit card, you can purchase a prepaid credit card from your local retailer***

4. Scan ALL Documents (no photos please) listed below into a single PDF, and attach to an email to: [emsrequirements@cod.edu](mailto:emsrequirements@cod.edu). DO NOT send links to shared drives such as Google Docs, and DO NOT submit photos. Scan and email as a single PDF by the application deadline of **August 25, 2024 at 3 p.m.**

- Completed **Loyola University Medical Center Application** found on pages 14 through 16 at the end of this packet
- Completed FERPA release form found on page #17 of this packet. This document is **REQUIRED** to process your application and send your information to Loyola University Medical Center.
- Copy of each of the following:
  - State of Illinois EMT license (if pending, submit NRMET letter of passing exam)
  - Current Healthcare Provider CPR Card
  - Health Insurance Card (with applicants name listed or proof of insurance document)
  - Valid Driver's License
  - Letter from employer verifying EMT or healthcare work experience (if applicable)

**DO NOT** submit any transcripts to this office along with your application (see directions in step 2)

**Recommendation Forms/Letters are not requested at this time. Those successfully completing the entrance exam will be given direction regarding any recommendation forms/letters.**

Your name will be added to the applicant list and forwarded to Loyola University Medical Center. Once testing is completed, Loyola will provide an approved class list to COD. Only students on the approved list will be allowed to register. Approved students will receive an email regarding the registration process to their dupage.edu e-mail address.

NOTE: If you have been accepted into another Paramedic program prior to the application deadline; please e-mail [emsrequirements@cod.edu](mailto:emsrequirements@cod.edu) to withdraw your application. You will not receive a refund for the \$50 Health Science application and this request is asking that you be removed from further considered for any and all programs you have applied for.

\*It's the responsibility of the applicant to verify that all items are submitted & completed. Should you have specific questions related to the above items, please contact the paramedic program coordinator listed on page 8.

***"All application documents delivered to the College of DuPage pertaining to a paramedic program admissions file become the property of the College of DuPage and will not be returned to applicants. This includes but is not limited to transcripts, recommendation forms, clinical evaluation forms, or outside test reports."***

Requests for admission are **not** automatically carried over to the following cycle. Applicants who were not accepted for the cycle in which they originally applied are asked to pay the \$25 non-refundable paramedic program application fee and submit any/all supporting documents as listed on the Admissions Checklist of the Application Packet requirements (if applicable).

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## REQUIRED DOCUMENTATION

Applicants must submit ALL of the following documentation in order to be considered for acceptance into the Paramedic Academy.

*Applications must be submitted by 3 p.m. on August 25, 2024.*

- Completed Application form
- Non-COD College transcripts sent to COD Records office if applicable
- Copy of Illinois driver's license
- Copy of current Illinois EMT license
- Copy of current American Heart Association Healthcare Provider CPR/BLS
- Copy of current Health Insurance Card (with applicants name listed or proof of insurance document)
- Letter from employer/supervisor verifying your experience as an EMT
- FERPA Release Form

## PRE-ADMISSION TESTING

Preadmission Testing consists of three sections and will be limited to three hours total:

1. Standardized Reading Comprehension
2. Math / Mechanical Aptitude
3. Basic EMT Knowledge

Applicants who meet or exceed the minimum scores on all three exams and have submitted a complete application packet will be invited to interview with the Paramedic Academy admissions board.

## TESTING DATES

Applicants must register for one of the following testing sessions.

To schedule, please call the Loyola EMS Office at 708-327-2547 starting September 2, 2024.

Monday, September 9, 2024 – 9:00 a.m.

Monday, September 9, 2024 – 1:00 p.m.

Tuesday, September 10, 2024 – 9:00 a.m.

Tuesday, September 10, 2024 – 1:00 p.m.

Doors close **PROMPTLY** at the testing time. Applicants arriving after the start time will not be allowed to test.

A map, along with directions to the EMS Office (where testing will take place) is attached to the end of this packet

# Loyola University Medical Center Paramedic Academy – Class of 2025



EMERGENCY  
MEDICAL  
SERVICES

CANDIDATE INFORMATION		
Last Name:	First Name:	Middle Initial:
Address:		Social Security Number:
City:	State:	Zipcode:
		Cell Phone Number:
E-mail Address:		

EMT COURSE INFORMATION	
Name of EMT School:	EMT Program Completion Date:
Name of Primary Instructor:	Phone Number:
IDPH EMT License Number:	Expiration Date:
National Registry Number:	Expiration Date:

EMT EXPERIENCE	
911 EMT Experience: _____ Years and _____ Months	Private / IFT EMT Experience: _____ Years and _____ Months
Name of Department:	Name of Company:
Have you ever <b>APPLIED</b> to a paramedic program before? If <b>YES</b> , where?:	
Have you ever <b>ATTENDED</b> a paramedic program before? If <b>YES</b> , where?:	
What was the reason for dismissal from the program?:	

EDUCATION HISTORY				
<i>LIST ALL SCHOOLS ATTENDED (HIGH SCHOOL, COLLEGE, UNIVERSITY, OR GRADUATE SCHOOL). IF MORE SPACE IS NEEDED, PLEASE PROVIDE AN ATTACHMENT.</i>				
Name of High school:	Dates Attended:	GPA:		
Name of School:	Dates Attended:	Total Credit Hours:	Major / Minor or Subject:	Degree Received / Year:
Name of School:	Dates Attended:	Total Credit Hours:	Major / Minor or Subject:	Degree Received / Year:

# Loyola University Medical Center Paramedic Academy – Class of 2025



EMERGENCY  
MEDICAL  
SERVICES

Name of School:	Dates Attended:	Total Credit Hours:	Major / Minor or Subject:	Degree Received / Year:
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MILITARY EXPERIENCE			
Branch:	Dates of Service:	Rank and MOS at Discharge:	Type of Discharge:
If other than honorable, please explain:			

EMPLOYMENT HISTORY				
<i>IF MORE SPACE IS NEEDED, PLEASE PROVIDE AN ATTACHMENT.</i>				
Company Name:	City / State:	Current Job Title:	Dates of Employment:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name of Supervisor:		Supervisor's Phone Number:		Reason for Leaving:
Duties / Responsibilities:				

Company Name:	City / State:	Current Job Title:	Dates of Employment:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name of Supervisor:		Supervisor's Phone Number:		Reason for Leaving:
Duties / Responsibilities:				

Company Name:	City / State:	Current Job Title:	Dates of Employment:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name of Supervisor:		Supervisor's Phone Number:		Reason for Leaving:

# Loyola University Medical Center Paramedic Academy – Class of 2025



EMERGENCY  
MEDICAL  
SERVICES

Duties / Responsibilities:

## APPLICANT ATTESTATION AND AUTHORIZATION

*/ attest* that the statements provided herein are true to the best of my knowledge. I understand that any incomplete, inaccurate, misleading, false or incorrect information given in this application may result in the rejection of my application. Such information may also render an acceptance void and/or can be cause for dismissal upon discovery.

*/ authorize* the Loyola University Medical Center Paramedic Academy and its agents to obtain any information relating to the facts provided in this application from schools, employers, criminal justice agencies or other individuals. This information may include but is not necessarily limited to, academic, performance, attendance, achievement, personal history, disciplinary action, arrest and conviction records.

*/ release* any employer, including individuals such as record custodians, from any and all liabilities that may result from the release of information to the Loyola University Medical Center Paramedic Academy, Loyola University Medical Center, or Loyola Emergency Medical Services System.

*/ agree* to submit to such tests as the Loyola University Medical Center Paramedic Academy may require.

Signature:

Date:



**College of DuPage  
Paramedic Program Application  
FERPA Release Form**

College of DuPage, in compliance with the Family Educational Rights and Privacy Act (FERPA), is required to protect the privacy of student education Records the College cannot disclose non-directory or personally identifiable information to a third party without the student's written consent.

I hereby authorize College of DuPage to notify the partner hospitals i.e. Advocate Good Samaritan Hospital, Loyola University Medical Center/Cadence Health, Edward Hospital, or Loyola University Medical Center, of my intent to pursue the paramedic program indicated above, and upon my application, to release details of my educational records for the purpose of admission consideration. Educational records may include, but are not limited to, College of DuPage transcripts and transcripts from previously attended institutions.

\_\_\_\_\_  
Student Name (Please Print)

\_\_\_\_\_  
COD ID Number

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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**College of DuPage Paramedic Program  
Applicant Recommendation Form**

**Section A: Must Be Completed By Applicant**

Paramedic Program applying to: \_\_\_\_\_

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

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant's E-mail Address: \_\_\_\_\_

The Family Educational Rights and Privacy Act (PL 93-380) allows a candidate to waive his/her rights of access to recommendations written on his/her behalf if the recommendation is used solely for the purpose of admission. You are not required to waive access. Under the legislation, you have the option of signing a waiver.

Check one and sign: \_\_\_\_\_ I waive my right of access to this recommendation

\_\_\_\_\_ I do not waive my right of access to this recommendation

Applicant's Signature: \_\_\_\_\_

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**Section B: Must be completed by applicant's instructor or employer. Please proceed only if Section A has been completed and signed by the applicant.**

The above individual is applying for admission into one of the College of DuPage Paramedic Programs. **Recommendation forms completed by friends or relatives of the applicant are unacceptable.** Please rate the applicant on the following characteristics by checking the appropriate boxes.

	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>
	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Unable to Assess</b>
<b>Academic Ability</b>					
<b>Clinical Ability</b>					
<b>Oral &amp; Written Language Skills</b>					
<b>Maturity/Respect for Others</b>					
<b>Motivation</b>					
<b>Dependability</b>					
<b>Punctuality</b>					
<b>Critical Thinking</b>					
<b>Kinesthetic Awareness</b>					
<b>Leadership</b>					
<b>Attention to Detail</b>					

How long have you known the applicant? \_\_\_\_\_

What is your relationship to the applicant? (i.e. instructor, clinical supervisor) \_\_\_\_\_

List two (2) of the applicant's strengths and describe:

List a weakness of the applicant and describe:

Name of person completing this form: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Institution or Facility: \_\_\_\_\_

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

Phone: \_\_\_\_\_

(Page 2 of 2)

## Hospital Information / Address

The address of the Loyola University Medical Center campus is 2160 S. First Ave., Maywood, IL 60153  
Loyola Medicine's main campus is 11 miles west of downtown Chicago, easily reached from I-290 or I-55.  
We are located on First Avenue between Roosevelt and Cermak Roads.

## Parking

### On Campus:

Our LUMC campus has visitor lots and a visitor parking garage.  
Parking in the lots and the garage costs \$5 for the day.

### Off-Campus:

Parking is available across the street from the Hospital at the Miller Meadow Cook County Forest Preserve.  
Parking in the Forest Preserve is free.

*LUMC IS NOT RESPONSIBLE FOR VEHICLES PARKED IN MILLER MEADOW.*

*PLEASE FOLLOW ALL POSTED SIGNS. THE FOREST PRESERVE CLOSSES AT SUN-DOWN.*

## Public Transportation

Loyola is accessible by Chicago Transit Authority (CTA) train, Metra train and Pace bus service using the following routes:

CTA – Take the Blue Line Forest Park Branch to the Des Plaines station and Pace bus route 308.

Metra – Take the Burlington Northern train to the Brookfield station and Pace bus route 331.

## Once On Campus:

The EMS building is Building #4 on the map (back side of this page).

If coming from the Hospital Parking Garage:

When walking into the building from the parking deck, turn left in front of the security desk and walk toward Emergency. There is an elevator at the end of the corridor on the left. Take the elevator to the basement and come through the double glass doors to the reception desk on your right.

# HEALTH SCIENCES CAMPUS



## Directory

### LOYOLA UNIVERSITY HEALTH SYSTEM

- Ronald McDonald® ————— 1  
Children's Hospital
- Burke Building ————— 2  
Patient Care
- Fahey Building ————— 3
- Emergency Dept. ————— 4
- Russo Surgical ————— 5  
Pavilion
- Hospital Expansion ————— 6  
Patient Care
- Mulcahy Center ————— 13
- Outpatient Center ————— 14

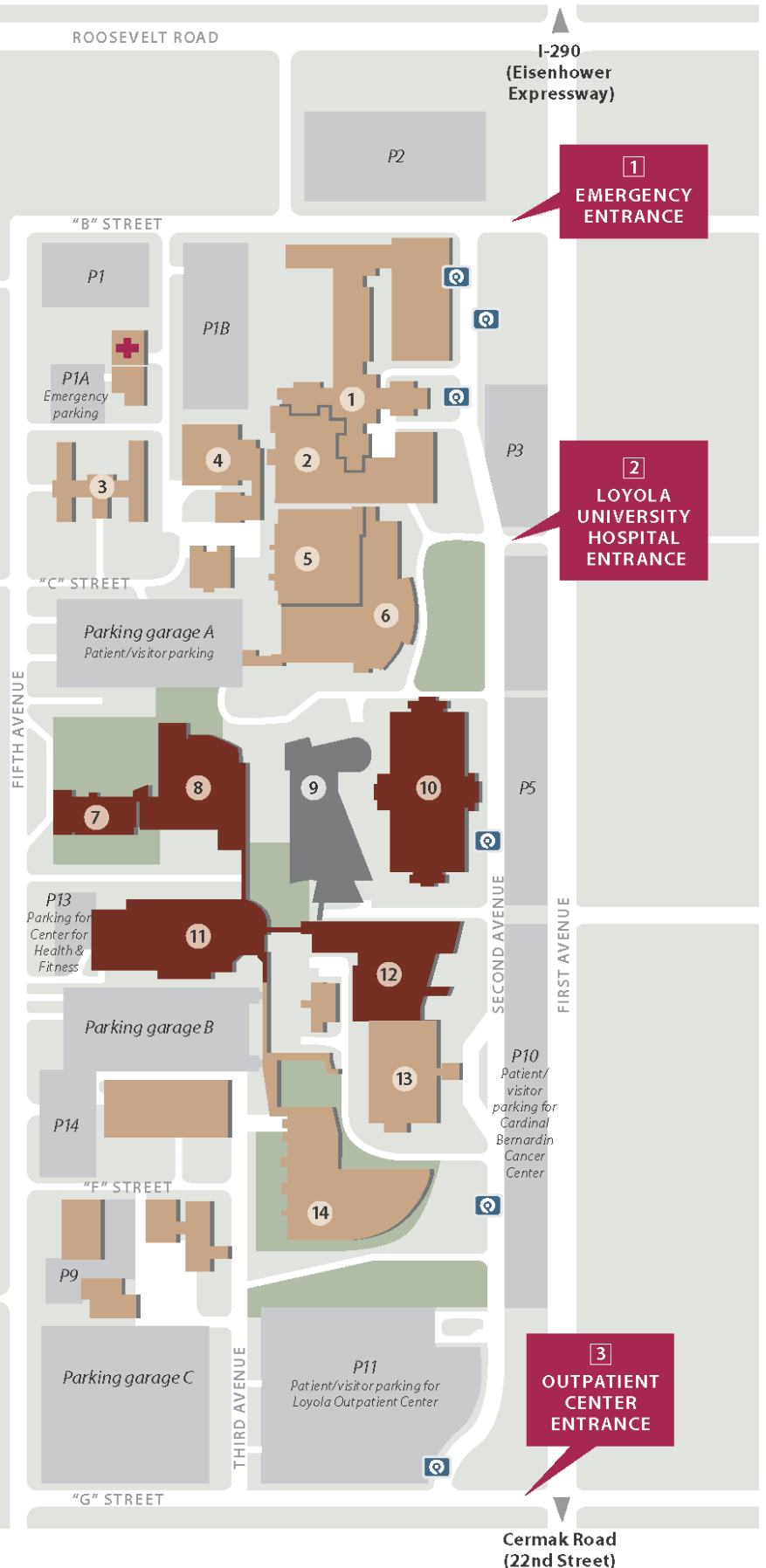
### HEALTH SCIENCES CAMPUS

- Marcella Niehoff ————— 7  
School of Nursing
- Stritch School ————— 8  
of Medicine/Cuneo Center
- Center for Translational ————— 9  
Research and Education
- Maguire Center ————— 10
- Center for Health ————— 11  
& Fitness
- Cardinal Bernardin ————— 12  
Cancer Center

### PARKING

- Employee parking ————— P  
*unless noted*
- Pace bus stop —————

Gravel lot  
FREE parking



**1**  
EMERGENCY  
ENTRANCE

**2**  
LOYOLA  
UNIVERSITY  
HOSPITAL  
ENTRANCE

**3**  
OUTPATIENT  
CENTER  
ENTRANCE