

Ozarks Technical Community College EMT-Intermediate Candidate Selection Form

Student Name _____ SS# _____
 OTC ID _____

	A (4 points)	B (3 points)	C (2 points)	1 point
EMT-B Work Experience			1 year	
Reference I	Outstanding	Above Average	Average	
Reference II	Outstanding	Above Average	Average	
Reference III	Outstanding	Above Average	Average	
EMT-B completed at OTC				
Below is optional and if completed will add to your overall point score. They are not required for entry into the program.				
CPR Certification (American Heart Association Healthcare Provider)				
Hepatitis B series (Complete or in progress – documentation required)				
Missouri Resident				
OTC District				

Transcripts: HS/GED _____ Date Received _____
 College _____ Date Received _____
 College _____ Date Received _____
 College _____ Date Received _____

Comments:

