



PARAMEDICINE (PM) DAY ADMISSION APPLICATION

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STEP 1: SUBMIT A GENERAL ADMISSIONS APPLICATION TO MASSBAY

- If this is your first time applying to MassBay, please complete and submit a MassBay General Admissions Application. If you are a current or former student, please check with the Office of Admissions prior to submitting a new MassBay General Admissions Application.
- Select your intended major as Paramedicine Day.
- Upon acceptance into MassBay, you will be admitted as a General Health Sciences student working toward meeting the admission requirements.

All Health Sciences students must meet their intended major's admission requirements to be considered for admission into the program.

STEP 2: ATTEND AN INFORMATION SESSION

Please click on this link for upcoming [Allied Health Profession Programs Information Session Schedule](#)

STEP 3: COMPLETE ALL PARAMEDICINE-DAY ADMISSION REQUIREMENTS

You must complete all admission requirements as outlined on the PM Day program application. Once you have fulfilled all items as indicated, submit your completed application to the Office of Admissions. **Please note that it is the applicant's responsibility for assuring that the application is complete and submitted by the application deadline.** If any of the required items are **incomplete or missing** at time of submission, your application will not be processed and you will not be considered for the program.

Wellesley Campus Admissions

50 Oakland Street
Wellesley Hills, MA 02481-5307
Tel: 781.239.2500
Fax: 781.239.2508

Framingham Campus Admissions:

19 Flagg Drive
Framingham, MA 01702-5928
Tel: 508.270.4059
Fax: 508.270.4110



Paramedicine Day Program Application

First and Last Name: _____

MassBay ID: _____

Contact Number _____

Email: _____

PLEASE INCLUDE WITH APPLICATION:

High School diploma, GED/HiSET or College degree (or have a copy in their student records) and MassBay Transcripts; current Massachusetts EMT or NREMT certification, current CPR certification

I understand that the application:

- **priority deadline is February 15, 2016;**
- can be accepted until May 30, 2016, or until program is full
- must be submitted in person to the Office of Admissions (Wellesley or Framingham); and
- reviewed by an Admissions Counselor

Acceptance of applications may be discontinued **without notice.*

Application Instructions: The applicant **must** complete each item on this application to be considered for the PM program. Your initials confirm that you have met each requirement. Submit your completed application to the Office of Admissions.

Admission Requirements		
Checklist Item	Important Information	<u>Applicant: initial below when complete (NOTE: Requirements are considered incomplete if in progress, scheduled, or requested)</u>
Attended a mandatory information session	Applicants must have attended a Mandatory Information Session <u>prior</u> to submission of application. Upcoming dates can be found at Nursing and Allied Health Profession Programs Information Session Schedule .	Applicant Initial: _____ Date Attended: _____
Math	Grades of "C" or better in an appropriate college level Math course are required. <u>Circle ONE of the following you completed:</u> ✓ MassBay Placement into Introductory Algebra (MA095) ✓ Completion of Basic Math Studies (MA 090) with a grade of "C" or higher ✓ Equivalent Transfer of College-Level Math (from another college) <i>*Consideration will be given to students who have completed college level algebra or higher</i>	Applicant Initial: _____

English	<p>Grade of "C" or better in the appropriate Freshman English course, no time limit. Circle ONE of the following you completed:</p> <ul style="list-style-type: none"> ✓ MassBay Placement into College Writing (EN100) ✓ Completion of Intro to Language (EN 090) ✓ Equivalent Transfer of College-Level English Composition 	Applicant Initial: _____
Reading Assessment Test	<p>Circle ONE of the following you completed:</p> <ul style="list-style-type: none"> ✓ Reading Assessment Test grade of "72" or higher ✓ Waiver (already holding a degree) from U.S. College or University. ✓ For more information click on Register for Placement Testing 	<p>Applicant Initial: _____</p> <p>Contact MassBay's Academic Achievement Center at 781-239-2620 to schedule the test.</p>
Official transcripts from all Colleges/Universities previously attended	<p>I have submitted official transcripts from all Colleges/Universities previously attended.</p> <p><i>* If you are currently registered, or have completed additional courses, you will submit/have submitted your final transcripts</i></p>	Applicant Initial: _____
Mailing Address	<p>The address on my student account profile is current and all correspondences will be sent to this address.</p> <p><i>* It is the applicant's responsibility to update their contact information via Bay Navigator</i></p>	Applicant Initial: _____

Paramedicine Program Immunization and Related Health Requirements:

<p>Students in the program are required to obtain certain immunization and health records and submit documentation thereof by published deadlines which are program-specific and determined by clinical rotation start dates. Immunization requirements are in accordance with clinical site requirements and Massachusetts state law. Although not an admissions requirement, submission of immunizations is required for participation in the program. Failure to have completed this step as explained in the below pages by the due date shown will result in the student being withdrawn from the program. Students who are withdrawn will be considered for readmission at a later date. The applicant's initial here indicates an acknowledgement of this requirement.</p>	Applicant Initial: _____
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Important Program Information

Evaluation Information:

Applications will be reviewed and considered for acceptance each semester until program is full. Priority is given by submission date of application.

Additional Important Information:

1. **If you are accepted, you MUST attend a Mandatory Orientation** during which time you will receive program specific information.
2. **The program anticipates accepting approximately 15 students each session.** The decision options in response to your completed application are: accepted to the program or denied admission to the program. Admission decisions are sent by U.S. Postal to the address you state on this application.
3. **Background Checks.** All MassBay Health Sciences program students whose course-work or clinical placement requires direct access to children, elderly, patients, disabled or other at-risk populations, must submit to a Massachusetts criminal offender records inquiry (CORI) and Sexual Offender Records Inquiry (SORI) and a national inquiry through National County Records Search. The purpose of the background checks are to ensure public safety and avoid unacceptable risk to vulnerable populations. If any background check report is returned with a finding(s), it may or may not prohibit progression in a Health Sciences Program.
4. **Disability Accommodation.** Please contact MassBay's [Office of Disability Services](#) for review and approval.
5. **Licensure.** Graduates are eligible to take the National Registry of EMT Paramedics Certification Examination. MassBay's Paramedicine Program is accredited by the Massachusetts Department of Public Health: Office of Emergency Medical Services.

Confirmation Statement

I confirm that I have read, reviewed, and understand the information provided in this application including the health and background check requirements/deadlines included in the following pages*. By providing my signature below, I certify that I have met the admission requirements for consideration into the Paramedicine Day Program.

Applicant Signature: _____ Date: _____

FOR OFFICE OF ADMISSIONS ONLY- DO NOT WRITE UNDER THIS LINE

Admissions Counselor- Please stamp application with date received below.



MassBay Community College Health Sciences Program Immunization and Related Health Requirements

Health Sciences students are required to keep their immunization and tuberculosis surveillance status up-to-date by following the guidelines set forth by the Centers for Disease Control and Prevention (CDC) for health care personnel.

BEFORE beginning the program, the following immunizations or documentation of immune status and tuberculosis (TB) screening are required for all Health Sciences students who have contact with clients, patients or blood/body fluids as part of their usual training responsibilities.

Definitions

Hepatitis B - One of the following is required to verify Hepatitis B immunity:

A positive antibody titer* (physician verification of results required) if you've previously received the three vaccinations.

or

Three (3) vaccinations (0, one month, and five months apart) AND a positive antibody titer* (physician verification of results required) taken 1 - 2 months after the 3rd vaccination.

*It is acceptable to attend clinical **ONLY IF** you have verified three vaccinations and are waiting to receive the titer unless the clinical affiliating agency to which you are assigned specifically requires a Hepatitis B titer.**

Tuberculosis (TB) - One of the following is required to verify the initial requirement:

Two-step TB Skin test (1 - 3 weeks apart);

- Step I is PPD "implant" is injected into the forearm then, In 2 - 3 days, this must then be "read" as negative and documented by a clinician;
- Step II occurs within 3 weeks of completing Step I when student returns to the clinician's office for a second "implant", and then returns 2 - 3 days after to have this implant read and documented as negative by the clinician.

* Once student has completed both steps I and II with a negative result, only a single (1-step) TB implant is required annually.

or

QuantiFERON or T-Spot (IGRA blood tests for use in diagnosing TB) lab report or physician verification of results.

or

Chest X-ray - If you have a positive TB Skin test or IGRA blood test result, you must submit documentation of a clear (negative) chest x-ray (lab report or physician verification of results required) dated within past 5 years, **AND** a negative symptom review check from your healthcare provider dated within the past year (required annually thereafter).

Tetanus & Diphtheria (Td) or Tetanus/Diphtheria/acellular Pertussis (Tdap) - Documentation of a Tdap within the past 10 years or a Td booster within the past 2 years is required.

Measles, Mumps, Rubella (MMR) 2-Dose Vaccine or Titers* - There must be documentation of either a positive antibody titer for all 3 components OR documentation of each vaccination component. If titer is negative or equivocal, 1 booster plus a new titer is required.

Varicella 2-Dose Vaccine or Titer* - There must be documentation of either a positive antibody titer for Varicella OR documentation of vaccination. If titer is negative or equivocal, 1 booster plus a new titer is required.

Seasonal Influenza vaccine (when available) – Submit documentation of a flu shot administered during the current flu season OR a declination waiver. The waiver form can be found on your Certified Background account and through the Division of Health Sciences. Waiver criteria may vary according to the Health Sciences program and supporting documentation may be required. It is highly recommended to take the Flu vaccination as early as possible, but not later than October 15th. Students who cannot be immunized for the

flu will be required to wear a mask in clinical settings. Programs will require students to submit documentation of vaccination (or meet the waiver requirements) each year because it is required by their practicum or clinical placement sites.

Report of Physical Examination & Immunization Record - This form (available for download under your CastleBranch account and found on the Division of Health Sciences' pages of the MassBay website) requires the student's signature authorizing the release of immunization information to clinical affiliating agencies. It also requires your physician to fill in confirmation of immunizations you've received and your physical exam results within the past year.

** Titers are laboratory blood tests to determine immunity to specific diseases. They are not immunizations.*

CastleBranch/MyCB - To track the health requirements of our students, we use an online document tracking system from a company named CastleBranch. Located in Wilmington, North Carolina, CastleBranch is one of the top 10 background screening and compliance tracking solutions companies in the nation. "MyCB" is a resource portal provided by CastleBranch to help facilitate student order placement, compliance tracking and national county records background screening services associated with MassBay's health program students. MyCB will send the student email "alerts" when documentation is missing, incomplete, or in need of updating. Authorized Division of Health Sciences staff will refer to MyCB data to determine whether a student has demonstrated (verified) compliance with all requirements to attend clinical, and is ready to enroll into the desired semester. MassBay's Division of Health Sciences does not accept or maintain any hard copies of health records, nor do we review any records for compliance. Likewise, submission of medical records to MassBay's Office of Student Development as a student in General Studies does not fulfill requirements for Health Sciences students. Please note: currently there is no additional fee to students for the MyCB account.

Other Related Requirements

CPR Certification – The CPR certification that is acceptable for health students is the "Basic Life Support for Health Care Providers" from the American Heart Association (AHA), the American Red Cross, or the equivalent from the Military Training Network or the National Safety Council. Students are responsible for taking a class to complete this certification, with the exception of Emergency Medical Technician (EMT) and Central Processing Technology (CPT) students. Student provides a front & back signed copy of the card the American Heart Association wallet-sized card that identifies him/her as CPR certified. Certificate of American Red Cross course completion is acceptable in lieu of wallet-sized card.

Technical Standards - Students must meet certain physical demands of performance so that they can successfully progress in their course work and ultimately graduate. This form (available for download under your MyCB account) is completed & signed by the student.

Acknowledgement of Student Handbook Form – This form (available for download under your MyCB account) is completed by the student and signed. The MassBay Health Sciences program Handbooks are updated each academic year and the final version will be available for review in the fall. Students are responsible for reviewing and understanding any changes made to their respective program Handbook during the entire time student is enrolled.

Background Check – A national county records search is also conducted through Castle Branch/MyCB. All MassBay health sciences program students whose course-work or clinical placement requires direct access to children, elderly, patients, disabled or other at-risk populations, must submit to a Massachusetts criminal offender records inquiry (CORI) and Sexual Offender Records Inquiry (SORI) and National CORI / SORI inquiry through National County Records Search. The purpose of the background checks are to ensure public safety and avoid unacceptable risk to vulnerable populations. The student must complete the CORI and SORI forms (provided at orientation) to authorize a search of records for past criminal or sexual offenses.

Additional Notes: Students who refuse to be vaccinated due to religious or medical reasons should discuss their particular circumstances with the program Chairperson **BEFORE** applying.

Program Due Dates for Uploading Documents to CastleBranch* "My CB"

<u>Program</u>	<u>Program Type</u>			<u>Semester Start</u>			<u>Health Document Due Date(s)</u>
	<u>Day</u>	<u>Evening (or Afternoon)</u>	<u>Week end</u>	<u>Fall</u>	<u>Spring</u>	<u>Summer</u>	
<u>Nursing - ADN Day</u>	<u>X</u>			<u>X</u>			<u>Aug 1st</u>
<u>Nursing - PN Day</u>	<u>X</u>			<u>X</u>			<u>Aug 1st</u>
<u>Surgical Technology - Day</u>	<u>X</u>			<u>X</u>			<u>Aug 30th</u>
<u>Surgical Technology - Eve</u>		<u>X</u>			<u>X</u>		<u>Feb 6th</u>
<u>Central Processing Technology</u>		<u>X</u>		<u>X</u>	<u>X</u>	<u>X</u>	<u>Aug 30th (for Fall), Jan 3rd (for Spring), May 15th (for Summer)</u>
<u>Rad Technology - Flex</u>		<u>X</u>			<u>X</u>		<u>Aug 1st before Yr 2</u>
<u>Rad Technology - Day</u>	<u>X</u>			<u>X</u>			<u>Aug 1st</u>
<u>Paramedicine - Day</u>	<u>X</u>			<u>X</u>			<u>Aug 30th</u>
<u>Paramedicine - Eve</u>		<u>X</u>			<u>X</u>		<u>Mar 15th</u>
<u>EMT - Day</u>	<u>X</u>			<u>X</u>	<u>X</u>	<u>X</u>	<u>Aug 30th (for Fall), Feb 1st (for Spring), May 15th (for Summer)</u>
<u>EMT - Afternoon</u>		<u>X</u>		<u>X</u>	<u>X</u>		<u>Aug 30th (for Fall), Feb 1st (for Spring)</u>
<u>EMT - Eve</u>		<u>X</u>		<u>X</u>	<u>X</u>		<u>Aug 30th (for Fall), Feb 1st (for Spring)</u>
<u>Phlebotomy</u>	<u>X</u>		<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>Aug 30th (for Fall), Mar 1st (for Spring), May 15th (for Summer)</u>
<u>Nurse Assistant</u>		<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>Oct 24th (for Fall), Mar 1st (for Spring), July 1st, (for Summer)</u>

All MassBay Division of Health Sciences students enrolled in a program that includes a clinical component must be fully compliant with all health and background check requirements by the designated program/semester due dates.

**You will receive your Castle Branch/MyCB login information at your program's orientation.

