

**Barton County Community College**  
**EMS Education**  
**Application for Paramedic**  
(Please do not type)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Level of BEMS Certification: \_\_\_\_\_ Year of Initial Certification: \_\_\_\_\_

Are you currently affiliated with an ambulance service?    Yes    No

If yes, what ambulance service? \_\_\_\_\_

Do you have any Felony records?    Yes    No    If yes, when? \_\_\_\_\_

If yes to Felony question, have you fulfilled the court requirements? \_\_\_\_\_

Please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list 2 personal references that we may contact:

1.

2.



