



EMORY  
UNIVERSITY

CEPAR  
Office of Critical Event  
Preparedness and Response



Emory Emergency Medical Services (EEMS)  
1599 Clifton Road  
Atlanta, GA 30322  
Office: (404) 727-0180

## EMORY EMS EDUCATION PROGRAM APPLICATION

### Fall 2024 - Spring 2025

***Deadline EXTENDED for incoming Freshmen and Transfer Students***

**Dear Emory EMS Education Program Applicant,**

Emory Emergency Medical Service (EEMS) is a student-operated volunteer EMS agency that provides vital medical services, education, and outreach to Emory University and the surrounding community. EEMS was founded in 1992 as the first collegiate EMS agency in the State of Georgia and is an award-winning and nationally recognized collegiate EMS organization.

In the Emory EMS Education Program, students will learn how to become Emergency Medical Technicians (EMTs) and Advanced EMTs (AEMTs) through classroom, lab, and clinical experiences. The curriculum is approximately nine months in length and follows the undergraduate academic calendar.

**Classes will meet on Mondays and Wednesdays from 6 PM-10 PM and approximately every other Saturday from 8AM-5PM** at 1599 Clifton Road on Emory's Atlanta campus. In addition to classroom hours, students will complete approximately 150 hours of field and clinical work with top EMS agencies and hospitals in the metro Atlanta area. The first day of class is September 9, 2024.

Upon program completion, graduates are expected to obtain State of Georgia EMS Licensure and volunteer for Emory EMS for at least one year. **Entry into the Emory EMS Education Program should be viewed as a minimum two-year commitment.** Although Class of 2025 students are still eligible to apply, they **will only be admitted as space allows.** Emory faculty, staff, and graduate students may also apply.

Once applications are reviewed, select applicants will be invited for a group interview on **Saturday, September 7 from 1 PM-5 PM.** Applicants should save this date on their calendars in the event that they are selected. Specific details about the interview process will be sent to selected applicants following initial application decisions.

While this course requires considerable extracurricular work, it can be one of the most rewarding activities during your time at Emory.

**Note:** This application is for *initial EMS education only*. If you are already licensed in Georgia as an EMS clinician and are interested in volunteering with Emory EMS, please email [emoryems@emory.edu](mailto:emoryems@emory.edu) for more details.

If you have any additional questions regarding the Emory EMS Education Program, please visit our website at [www.emergency.emory.edu/ems](http://www.emergency.emory.edu/ems).

# EMORY EMS EDUCATION PROGRAM APPLICATION

## Fall 2024 - Spring 2025

**Extended Deadline: Application must be RECEIVED by August 30, 2024, at 11:59 PM ET.**

**Instructions:** Complete this application to the best of your knowledge. All fields are required and should be typed (except signatures). *Failure to submit a completed application with ALL documents requested may prohibit acceptance into the program.* Please email the completed application to [emoryems@emory.edu](mailto:emoryems@emory.edu) with the **subject line “EEMS Education Program 2024-2025 Application: First Name Last Name.”** Your application should be a single PDF document in the order outlined below:

- (1) **Completed Application** (pages 2-6 of this document)
- (2) **Resume/CV** (maximum 1 page)
- (3) **Copy of High School Diploma** (or Equivalent)
- (4) **Copy of Driver’s License** (or another form of government ID)

**Optional: Letter of Recommendation** (maximum of 1)

*Note: Letter writers should submit letters of recommendation to [emoryems@emory.edu](mailto:emoryems@emory.edu). Letter writers should be instructed to clearly state “Education Program Letter of Recommendation” and the applicant’s name in the subject line of the email.*

Statements of Understanding (initial each):

\_\_\_\_\_  
Initial Here By initialing here, I understand that the Emory EMS Education Program has additional field internship requirements. Students will be required to complete approximately 150 internship hours prior to program completion.

\_\_\_\_\_  
Initial Here By initialing here, I understand that the tuition for the Fall 2024 - Spring 2025 Emory EMS Education Program is **\$2,100.00**. I understand that I am financially responsible for additional fees such as transportation to and from clinical sites, uniform accessories, etc. More information about costs associated with the program can be found on the Emory EMS website.

\_\_\_\_\_  
Initial Here By initialing here, I understand students are required to pass a Criminal Background Check and Drug Screen after acceptance to the program.

\_\_\_\_\_  
Initial Here By initialing here, I am acknowledging that I have read the cover letter (page 1) to this application and understand that enrolling in the Emory EMS Education Program is a minimum 2-year commitment.

\_\_\_\_\_  
Initial Here By initialing here, I understand that I may be required to attend a group interview on **Saturday, September 7, 2024, from 1 PM-5 PM.**

\_\_\_\_\_  
Initial Here By initialing here, I verify that I am eligible for the **extended deadline** (incoming freshman and newly accepted transfer students only).

For questions, email [emoryems@emory.edu](mailto:emoryems@emory.edu) or call (404) 727-0180.

**APPLICANT INFORMATION**

**Name** \_\_\_\_\_  
Last First Middle

**Permanent Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Primary Phone Number** \_\_\_\_\_ **Emory Student/Employee ID#** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Emory E-mail Address** \_\_\_\_\_

**Parent/Guardian Name (if under 18)** \_\_\_\_\_

Are you alcohol or drug dependent? **Yes** **No**

Have you ever been convicted in any court of a felony or other criminal offense, or do you have any criminal offense pending? (If yes, attach an explanation) **Yes** **No**

Are you an Emory undergraduate student? **Yes** **No**

**If yes**, please indicate your intended graduation year: \_\_\_\_\_

**If no**, how are you affiliated with Emory University? \_\_\_\_\_

**Statement of Understanding: Immunizations and Screenings**

\_\_\_\_\_ By initialing here, I understand that Emory EMS Education Program Students must demonstrate compliance with Emory University's immunization/screening requirements for health sciences students. Further details regarding these specific requirements will be provided to accepted applicants.

Initial Here

**Please take time and care in answering each of the essays below. Word limits are strictly enforced.**

**Essay 1 of 2:** The purpose of the Emory EMS Education Program is to prepare program graduates to volunteer for Emory EMS. Describe why you want to undergo initial EMS education with the Emory EMS Education Program and eventually volunteer for Emory EMS.  
*(maximum 500 words)*

**Essay 2 of 2:** EMTs and AEMTs face the potential for failure on every call. Key competencies of a successful EMS clinician (and student) include the abilities to accept failure, view mistakes as learning opportunities, and grow from past experiences. Describe a significant mistake that you made recently in your life. What lessons did you learn from this experience? Explain.  
*(maximum 500 words)*

I do, by my signature, certify that the information in this application is true and correct to the best of my knowledge. I understand that willfully supplying false information is sufficient cause for rejection of my application or removal from the program.

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

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

Parent/Guardian Signature (if under 18): \_\_\_\_\_

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