Harper College EMERGENCY MEDICAL TECHNICIAN (EMT) Program
Registration Permit

(Submit to the Health Careers Division Office, Avanté Center, Room X250)

SEMESTER AND YEAR OF INTENDED ENROLLMENT

_____ **SPRING**   _____**FALL**
    (YEAR)   (YEAR)

PLEASE PRINT:

Name:	Harper ID #:	
Former Name(s):	E-mail Address:	
Date of Birth: (Month / Day / Year)	Home Phone Number:	Alternate Phone Number:

Prerequisite Checklist for the Emergency Medical Technician Course (EMS110)

All of the following must be satisfied <u>before</u> you submit this Registration Permit.

- **Official final high school transcript with graduation date posted or acceptable equivalent, per the Joint Committee on Administrative Rules.***

  (*This document will also be used to determine if you have satisfied the minimum age (18) prerequisite.)

- **If previously enrolled at Harper College, minimum GPA of 2.0. If your Harper College GPA is below 2.0, you must meet with a Student Development counselor who will determine if you are eligible for a waiver of the GPA prerequisite.**

Once your request has been processed, you will be notified *by email* that you can register for the class according to the registration schedule in place for the current term.

I have carefully reviewed the Harper College Emergency Medical Technician prerequisites. I understand what is required as well as my responsibility in satisfying them in order to be eligible to register for EMS 110. Further, I understand that:
- It is my responsibility to see that required documents have been received;
- If I do not enroll this term, I must submit a new request form and satisfy all prerequisites for a future tem.

Signature: _____ Date: _____

For Office Use Only:

_____ Final high school transcript or equivalent _____ 2.0 GPA minimum / Counselor waiver _____ Minimum age 18	_____ To Registrar's Office _____ Attribute code entered _____ Email date