



California Institute of Emergency Medical Training

Enhanced Hybrid Long Beach EMT Program Requirements

2669 Myrtle Ave #201 Long Beach/Signal Hill CA 90755

Welcome to the CIEMT Enhanced Hybrid EMT course Long Beach.

Your online coursework and live classroom sessions work closely together. This is a paced online course with live on-line lectures and in-class skills days. You are expected to complete your online assignments and attend the weekly on-line live class sessions to learn and review the didactic material.

- ✓ The on-line live class session will be on Tuesdays and Thursdays from 6pm-10pm and will be presented through the platform GoToTraining. **These are mandatory meetings.** Your program course schedule is provided for you in your dashboard after registration.
- ✓ Skills session will re- enforce course material and teach the hands-on portion of EMT work. The Skills session will take place every other Thursday of the 8-week course, in-class at the CIEMT Long Beach/Signal Hill CA campus from 4pm-11pm. They will include - Session 1 of the program, Rules/Enrollment and an AHA BLS course. Skills Day 1, 2, 3. Skills Review Day and Final Written Exam/Skills Final Day. **The 6 (six) in-class sessions are mandatory.**
- ✓ Please note: The AHA BLS course is a State prerequisite for the EMT program and is not included in the cost of the course. It is offered on the first day at a discounted rate of \$40 for our students only. (If the BLS course is required at any other time the full rate for the BLS course will apply.)
- ✓ In addition, you are required, per the State of California, to complete 24 hours of clinical training and have 10 patient contacts. The clinical training will be done with one of the ambulance companies that has signed an affiliation agreement with CIEMT. We have multiple locations and companies for you to choose from. You will be doing this on your own time and **must be completed by the end of the program.**

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at
1747 N. Market Blvd. Ste. 225, Sacramento California 95834
P.O. Box 980818, West Sacramento CA 95833-0818
Ph (888) 370-7589 or by Fax (916) 263-1897
Ph (916) 431-6959 or by Fax (916) 263-1897 www.bppe.ca.gov



California Institute of Emergency Medical Training - Hybrid Enrollment Agreement

Skills instruction will be provided at these locations:

2669 Myrtle Ave. # 201-203 Long Beach, CA 90755 (Main Campus)

13933 Crenshaw Blvd Hawthorne CA 90250 (Satellite Campus)

This program consists of a combination of Online work and classroom sessions (for practical skill training, skill testing and final written testing) and is designed to give the student the skill and knowledge needed to function as a working Emergency Medical Technician and to facilitate passing the National Registry Exam. All equipment required for the practical skills such as stethoscopes, blood pressure cuffs, splinting devices and spinal boards will be provided by the school at no cost to the student. The program is intended for those who want to gain employment as a firefighter, emergency care technician at a hospital, as an ambulance driver or attendant. It is also for those individuals who are planning on attempting to obtain a higher level of medical training such as RN, PA or MD as an enhancement for the competitive application process for those professions.

Initial Certification Program for Emergency Medical Technician (EMT):

Didactic & Skills

179 Hrs.

Clinical

24 Hrs.

Total Class

203 Hrs.

Cancellation and refund policy: STUDENT'S RIGHT TO CANCEL

Students are required to submit a two-hundred-dollar (\$250.00) registration fee as a condition of registration for the Initial Certification Program for EMT-Basic. Cancellation of attendance in this program will allow the student a full refund only if cancellation is made Ten (10) working days prior to the start date of the class in which the student has registered. If cancellation is made less than ten working days prior to the start date of the course, the registration fee is considered non-refundable. Cancellation is defined as sending a date verifiable e-mail to the CIEMT course program directors e-mail address. If the provisions of cancellation described herein are not met the **registration fee is considered non-refundable.** (Matthew Goodman CIEMT Program Director, 562 989-1520, Admin@CIEMT.COM)

An institution offering a distance educational program where the instruction is not offered in real time shall transmit the first lesson and any materials to any student within seven days after the institution accepts the student for admission. The student shall have the right to cancel the enrollment agreement and receive a full refund before the first lesson and materials are received. Cancellation is effective on the date written notice of cancellation is sent. The institution shall make the refund pursuant to section 71750 of the Regulations. If the institution sent the first lesson and materials before an effective cancellation notice was received, the institution shall make a refund within 45 days after the student's return of the materials. (1) An institution shall transmit all lessons and materials to the student if the student has fully paid for the educational program and, after having received the first lesson and initial materials, requests in writing that all of the material be sent. (2) If an institution transmits the balance of the material as the student requests, the institution shall remain obligated to provide the other educational services it agreed to provide, but shall not be obligated to pay any refund after all of the lessons and material are transmitted.

Student Services:

If necessary, academic counseling will be provided at no cost to the student at the start of the second week and third week of the Initial Certification Program for the Hybrid Emergency Medical Technician course. The need for counseling and subsequent tutorial recommendations will be determined by a thorough review of both academic grades on daily quizzes and practical skills performance evaluation. Tutoring will be available for a nominal fee by qualified CIEMT instructors, approved and designated by the program director. It is the student's responsibility to seek assistance and or tutoring when he/she feels it may be needed.

The CIEMT refund policy for the Enhanced Hybrid EMT Program: Students who withdraw from the Hybrid EMT Program prior to the 60 percent point (prior to the start of Skills Session # 2) of the course will receive a prorated refund calculated as follows.

1. A registration fee of \$250 dollars will be deducted from the total tuition.
2. An electronic textbook fee of \$133.94 is non-refundable if the access code has been used. The code, once used, belongs to the student and is valid for 12 months on the JBL platform (not course).

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at

1747 N. Market Blvd. Ste. 225, Sacramento California 95834

P.O. Box 980818, West Sacramento CA 95833-0818

Ph (888) 370-7589 or by Fax (916) 263-1897

Ph (916) 431-6959 or by Fax (916) 263-1897 www.bppe.ca.gov



3. The remaining figure will be divided by the number of expected hours spent in the program. Each “Section” of the Hybrid EMT Program will be assigned a number of hours based upon estimated time needed to complete each section. The course consists of 183 hours of instruction over a 10-week period. You will spend on average 18.3 hours per week or 2.61 hours per day.

4. The sum arrived at through the calculation of #2 is the cost per hour for the training.

5. The amount owed by the student is derived by multiplying the total expected hours spent in the Hybrid program by the hourly charge for instruction plus the amount of the registration fee and materials fee.

6. The refund shall be any amount in excess of the figure derived in #4.

7. The student must exercise his or her right to cancel or withdraw before 60% of the Hybrid EMT Program is completed.

8. The student must exercise his or her right to cancel or withdraw before attending skills day 2. For your EMT program the date will be _____ 25

Example: A student withdraws from the CIEMT HYBRID EMT course on Friday of Week 5 in the course. This is day 33 of the course or 86.1 hours into the course. The refund of tuition would be calculated as follows:

1. \$1161.06 Course Fee - \$0 STRF - \$250.00 Registration Fee = \$911.06

2. \$911.06 divided by the number of hours in the program 179 Hrs. = \$5.08 per hour.

3. The amount owed by the student would be 86.1 hours X the hourly rate of \$5.08 = \$437.38 plus the registration fee of \$250.00 equaling a student owed amount of \$687.38

4. The amount in excess and refund to the student would be tuition amount \$1161.06 – \$687.38 the amount owed by the student, which would equal a refund amount paid to the student of \$473.68

Note: Students that reach the 60 percent point (by the start of Skill Session #2) in the Hybrid EMT Program will receive no refund. To officially withdraw from the course the student MUST send date verifiable e-mail to the CIEMT course program directors e-mail address admin@ciemt.com.

Student Tuition Recovery Fund

“The State of California established the Student Tuition Recovery Fund (STRF) to relieve or mitigate economic loss suffered by a student in an educational program at a qualifying institution, who is or was a California resident while enrolled, or was enrolled in a residency program, if the student enrolled in the institution, prepaid tuition, and suffered an economic loss. Unless relieved of the obligation to do so, you must pay the state-imposed assessment for the STRF, or it must be paid on your behalf, if you are a student in an educational program, who is a California resident, or are enrolled in a residency program, and prepay all or part of your tuition.

You are not eligible for protection from the STRF and you are not required to pay the STRF assessment, if you are not a California resident, or are not enrolled in a residency program.”

(b) In addition to the statement required under subdivision (a) of this section, a qualifying institution shall include the following statement in its school catalog: “It is important that you keep copies of your enrollment agreement, financial aid documents, receipts, or any other information that documents the amount paid to the school. Questions regarding the STRF may be directed to the Bureau for Private Postsecondary Education, 1747 North Market Blvd., Suite 225, Sacramento, CA 95834, (916) 431-6959 or (888) 370-7589.

To be eligible for STRF, you must be a California resident or are enrolled in a residency program, prepaid tuition, paid or deemed to have paid the STRF assessment, and suffered an economic loss as a result of any of the following:

1. The institution, a location of the institution, or an educational program offered by the institution was closed or discontinued, and you did not choose to participate in a teach-out plan approved by the Bureau or did not complete a chosen teach-out plan approved by the Bureau.

2. You were enrolled at an institution or a location of the institution within the 120-day period before the closure of the institution or location of the institution, or were enrolled in an educational program within the 120-day period before the program was discontinued.

3. You were enrolled at an institution or a location of the institution more than 120 days before the closure of the institution or location of the institution, in an educational program offered by the institution as to which the Bureau determined there was a significant decline in the quality or value of the program more than 120 days before closure.

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at

1747 N. Market Blvd. Ste. 225, Sacramento California 95834

P.O. Box 980818, West Sacramento CA 95833-0818

Ph (888) 370-7589 or by Fax (916) 263-1897

Ph (916) 431-6959 or by Fax (916) 263-1897 www.bppe.ca.gov



4. The institution has been ordered to pay a refund by the Bureau but has failed to do so.
 5. The institution has failed to pay or reimburse loan proceeds under a federal student loan program as required bylaw, or has failed to pay or reimburse proceeds received by the institution in excess of tuition and other costs.
 6. You have been awarded restitution, a refund, or other monetary award by an arbitrator or court, based on a violation of this chapter by an institution or representative of an institution, but have been unable to collect the award from the institution.
 7. You sought legal counsel that resulted in the cancellation of one or more of your student loans and have an invoice for services rendered and evidence of the cancellation of the student loan or loans.
- To qualify for STRF reimbursement, the application must be received within four (4) years from the date of the action or event that made the student eligible for recovery from STRF.

A student whose loan is revived by a loan holder or debt collector after a period of noncollecting may, at any time, file a written application for recovery from STRF for the debt that would have otherwise been eligible for recovery.

If it has been more than four (4) years since the action or event that made the student eligible, the student must have filed a written application for recovery within the original four (4) year period, unless the period has been extended by another act of law.

However, no claim can be paid to any student without a social security number or a taxpayer identification number.”

If the Student has received federal student financial aid funds, the student is entitled to a refund of moneysnot paid from federal student financial aid program funds. Cancellation or withdraw from the program is defined as ether directly speaking to the CIEMT course program director or sending a date verifiable e-mail to the CIEMT course program directors e-mail address. If the provisions of cancellation described herein are not met the deposit is considered non-refundable. (Matt Goodman, CIEMT Program Director, 562 989-1520, admin@ciemt.com) the student is eligible for a student loan and the student defaults on a **federal or state** loan, both of the following may occur: The federal or state government or loan guarantee agency may take action against the student, including applying any income tax refund to which the person is entitled to reduce the balanceowed on the loan. The student may not be eligible for any other federal student financial aid at another institution or other government assistance until the loan is repaid. If the student obtains a loan to pay for an educational program, the student will have the responsibility to repay the full amount of the loan plus interest, less the amount any refund.

NOTICE CONCERNING TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT OUR INSTITUTION

The transferability of credits you earn at CIEMT is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the completion certificate you earn in the CIEMT EMT-Basic program is also at the complete discretion of the institution to which you may seek to transfer. If the completion certificate that you earn at this institution is not accepted at the institution to which you seek to transfer, you may be required to repeat some or all of your course work at the institution. For this reason, you should make certain that your attendance at this institution meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending CIEMT to determine if your completion certificate will transfer. CIEMT is a private school and has not entered into an articulation or transfer of credit agreement with anycollege or university. **The course does not provide the student with any college credits towards any degree.** This includes any credit for prior “experiential learning”. Prior to signing this enrollment agreement, you must be given a catalog or brochure and a School Performance Fact Sheet, which you are encouraged to review prior to signing this agreement. These documents contain important policies and performance data for this institution. This institution is requiredto have you sign and date the information included in the School Performance Fact Sheet relating to completion rates, placement rates, certification exam passage rates, and salaries or

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at

1747 N. Market Blvd. Ste. 225, Sacramento California 95834

P.O. Box 980818, West Sacramento CA 95833-0818

Ph (888) 370-7589 or by Fax (916) 263-1897

Ph (916) 431-6959 or by Fax (916) 263-1897 www.bppe.ca.gov



wages, and the most recent three-year cohort default rate, if applicable, prior to signing this agreement.

Student's initials _____ I certify that I have received/obtained the catalog, School Performance Fact Sheet and information regarding completion rates, placement rates, certification exam passage rates, and salaries or wages information, and the most recent three-year cohort default rate, if applicable, included in the School Performance Fact Sheet, and have signed, initialed, and dated the information provided in the School Performance Fact Sheet. Downloadable from our web site at ciemt.com. Complaints: A student or any member of the public may file a complaint about this institution with the **Bureau for Private Postsecondary Education** by calling 1 (888) 370-7589 or by completing a complaint form, which can be obtained on the bureau's internet Web site at www.bppe.ca.gov

THE FULL AMOUNT OF \$1295 (TWELVE HUNDRED AND NINETY-FIVE DOLLARS) IS THE TOTAL CHARGE TO ATTEND THE INITIAL CERTIFICATION PROGRAM FOR EMT AND IS DUE IN FULL NO LATER THEN THE FIRST DAY OF INSTRUCTION OF THE COURSE.

STUDENT TUITION RECOVERY FUND FEE	\$0.00 (non-refundable)
INITIAL CERTIFICATION PROGRAM FOR EMT	\$911.06 +
REGISTRATION FEE	\$250.00 (non-refundable within 10 working days of course)
E-TEXTBOOK FEE FROM JONES & BARTLETT	<u>\$133.94</u> (non-refundable if opened)

TOTAL COURSE CHARGE **\$1295.00**

YOU ARE RESPONSIBLE FOR THIS AMOUNT. IF YOU GET A STUDENT LOAN, YOU ARE RESPONSIBLE FOR REPAYING THE LOAN AMOUNT PLUS ANY INTEREST.

TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE: **\$1295.00**

ESTIMATED TOTAL CHARGES FOR THE ENTIRE EDUCATIONAL PROGRAM: **\$1295.00**

THE TOTAL CHARGES THE STUDENT IS OBLIGATED TO PAY UPON ENROLLMENT: **\$1295.00**

OPTIONAL TUTORING

\$20.00/Hr.

PREREQUISITE: AHA BLS COURSE FEE-----CIEMT STUDENT \$40-----OTHER ENTITY -----\$60-\$100

I understand that this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution's cancellation and refund policies have been clearly explained to me.

STUDENT SIGNATURE _____ **DATE** _____

This agreement is a legally binding instrument when signed by the student and accepted by the school.

CIEMT PROGRAM DIRECTOR SIGNATURE Matthew Goodman

CIEMT does not provide services or documents for English as-a-second-language students

The name of your program is _____.

Period covered by this enrollment agreement

Your Program Start Date _____ **2025** **Your Program End Date** _____ **2025**

An enrollment agreement shall be written in language that is easily understood. If English is not the student's primary language, and the student is unable to understand the terms and conditions of the enrollment agreement, the student shall have the right to obtain a clear explanation of the terms and conditions and all cancellation and refund policies in his or her primary language.

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at

1747 N. Market Blvd. Ste. 225, Sacramento California 95834

P.O. Box 980818, West Sacramento CA 95833-0818

Ph (888) 370-7589 or by Fax (916) 263-1897

Ph (916) 431-6959 or by Fax (916) 263-1897 www.bppe.ca.gov



STUDENT INTERN AGREEMENT

This agreement is entered into on _____, 20____, between ("The Student") _____ who lives

at _____ and CIEMT ("Agency").

Student is enrolled in a course of study at the California Institute of Emergency Medical Training designed to enable the student to gain eligibility to become a licensed/certified Emergency Medical Technician-Basic. As part of the curriculum, Student has enrolled in the Clinical Experience, which is offered through the School with Agency's assistance. The Clinical Experience involves: 1) Student's performing acquired pre-hospital skills alongside Agency's personnel; and, 2) accompanying and observing the Agency's personnel providing emergency and non-emergency ambulance transport, care and related services.

Student has asked to participate in Clinical Experience knowing that participation will require Student to accompany Agency personnel in dangerous and potentially life-threatening situations. Student realizes that Agency could not, and would not, allow Student to accompany its personnel without his/her agreement to: (i) release the Agency from any and all claims for injury or death which may result from Student's participation in the program; (ii) assume the risk of death or injury associated with the Clinical Experience; (iii) agree to read, understand and follow Agency's policies, procedures and guidelines; (iv) act in a professional and respectable manner at all times; and follow the instruction/direction of Agency personnel with respect to patient care, demeanor, safety, use of personal protective devices, scene control, etc.

Student understands that he or she is exposing himself or herself to certain risks inherent in the activities associated with the Clinical Experience and IN CLASS ATTENDANCE. Student hereby represents that he or she AGREES TO ASSUME THE RISKS INHERENT IN THE ACTIVITY. These risks include, but are not limited to, being hurt or injured: (1) by broken glass (or other scene hazards) including various cuts about the head, face, eye, hands, legs, and torso; (2) by exposure to tetanus or contagious diseases such as the Hepatitis B virus, COVID-19 and Omicron the Human Immunodeficiency Virus ("HIV"); (3) injury due to gurney lifts and or drops; (4) injury from slip and fall type incidents; (5) various strains and/or sprains to one and/or all muscle groups; (6) risks associated with "Code 3" or emergency driving; and (7) risks at the scene of emergencies including assault and battery. In consideration of Agency's agreement to provide the Clinical Experience to Student without cost and IN CLASS ATTENDANCE at the cost of the course, Student agrees to release and forever discharge Agency and its owners, officers, employees, and agents of and from all claims, demands, suits, injuries or damages of any kind arising in any way out of the Student's participation in this program provided, however, that this indemnity is not intended to cover claims against agency arising solely out of Agency's own negligence or intentional conduct

Student further agrees to: (i) follow Agency's policies, procedures and work rules; (ii) follow Agency's instruction and direction with respect to patient care, safety, personal protection; and, abide by Agency rules and direction. Student understands that failure to follow the Agency's direction may result, in Agency's sole discretion, in his/her expulsion from the Clinical Experience program. Student certifies that he/she is at least eighteen (18) years old and is an adult with full legal authority to execute this release.

By Signing this Document, You Acknowledge That You Have Been Advised That There Are Risks Inherent in this Type of Activity and Have Decided to Assume That Risk and Release the Agency of and from All Liability. You Agree to Release the Agency from Any Claims Associated with the Event and That You, Not the Agency, Are Assuming Complete and Total Responsibility for and Any and All Injuries, Damages or Losses That You May Suffer as a Result of Participating in the Clinical Experience Program.

Dated: _____

Signature of Student

Print name

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at

1747 N. Market Blvd. Ste. 225, Sacramento California 95834

P.O. Box 980818, West Sacramento CA 95833-0818

Ph (888) 370-7589 or by Fax (916) 263-1897

Ph (916) 431-6959 or by Fax (916) 263-1897 www.bppe.ca.gov



California Institute of EMT
2669 Myrtle Ave #201-203
Signal Hill CA 90755
(562) 989-1520: ciemt.com

SCHOOL PERFORMANCE FACT SHEET
CALENDAR YEARS 2022 & 2023

EMT Hybrid Course (203 hours)

On-Time Completion Rates (Graduation Rates)

Includes data for the two calendar years prior to reporting.

Calendar Year	Number of Students Who Began the Program	Students Available for Graduation	Number of On-Time Graduates	On-Time Completion Rate
2023	85	85	35	41%
2022	74	74	31	41%

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information.

Job Placement Rates (includes data for the two calendar years prior to reporting)

Calendar Year	Number of Students Who Began Program	Number of Graduates	Graduates Available for Employment	Graduates Employed in the Field	Placement Rate % Employed in the Field
2023	85	35	32	1	.03%
2022	74	31	31	1	.03%

You may obtain from the institution a list of the employment positions determined to be in the field for which a student received education and training. (The student can obtain this information by requesting it from admin@ciemt.com)

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information.



California Institute of EMT
2669 Myrtle Ave #201-203 Signal Hill
CA 90755 (562) 989-1520: ciemt.com

Gainfully Employed Categories (includes data for the two calendar years prior to reporting)

Part-Time vs. Full-Time Employment

Calendar Year	Graduate Employed in the Field 20-29 Hours Per Week	Graduates Employed in the Field at Least 30 Hours Per Week	Total Graduates Employed in the Field
2023	0	1	1
2022	0	1	1

Single Position vs. Concurrent Aggregated Position

Calendar Year	Graduates Employed in the Field in a Single Position	Graduates Employed in the Field in Concurrent Aggregated Positions	Total Graduates Employed in the Field
2023	1	0	1
2022	0	1	1

Self-Employed / Freelance Position

Calendar Year	Graduates Employed who are Self-Employed or Working Freelance	Total Graduates Employed in the Field
2023	0	1
2022	1	1

Institutional Employment

Calendar Year	Graduates Employed in the Field who are Employed by the Institution, an Employer Owned by the Institution, or an Employer who Shares Ownership with the Institution.	Total Graduates Employed in the Field
2023	0	0
2022	0	0

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information



California Institute of EMT 2669
Myrtle Ave #201-203 Signal Hill CA 90755
(562) 989-1520: ciemt.com

License Examination Passage Rates

(Includes data for the two calendar years prior to reporting)

Calendar Year	Number of Graduates in Calendar Year	Number of Graduates Taking Exam	Number Who Passed First Available Exam	Number Who Failed First Available Exam	Passage Rate
2023	35	35	31	4	88%
2022	31	22	20	2	90%

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information.

Salary and Wage Information

(Includes data for the two calendar years prior to reporting)

Annual salary and wages reported for graduates employed in the field.

Calendar Year	Graduates Available for Employment	Graduates Employed in Field	\$20,001 - \$25,000	\$35,001 - \$40,000	\$40,001 - \$45,000	\$45,001 - \$50,000	No Salary Information Reported
2023	32	0	0	0	0	0	32
2022	31	1	0	0	0	0	31

A list of sources used to substantiate salary disclosures is available from the school.

(The student can obtain this information by requesting it from admin@ciemt.com)

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information.



California Institute of EMT
2669 Myrtle Ave #201-203
Signal Hill CA 90755
(562) 989-1520: ciemt.com

Cost of Educational Program

Total charges for the program for students completing on-time in 2022 & 2023: **\$1295**. Additional charges may be incurred if the program is not completed on-time.

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information.

Students at California Institute of EMT are not eligible for federal student loans. This institution does not meet the U.S. Department of Education criteria that would allow its students to participate in federal student aid programs.

Student's Initials: _____ Date: _____

Initial only after you have had sufficient time to read and understand the information.

This fact sheet is filed with the Bureau for Private Postsecondary Education. Regardless of any information you may have relating to completion rates, placement rates, starting salaries, or license exam passage rates, this fact sheet contains the information as calculated pursuant to state law.

Any questions a student may have regarding this fact sheet that have not been satisfactorily answered by the institution may be directed to the Bureau for Private Postsecondary Education at 1747 North Market Blvd., Suite 225, Sacramento, CA95834 www.bppe.ca.gov, toll-free telephone number (888) 370-7589 or by fax (916) 263-1897.

Student Name - Print

Student Signature

Matthew Goodman

School Official

Date

Date



California Institute of EMT

2669 Myrtle Ave #201-203

Signal Hill CA 90755

(562) 989-1520: ciemt.com

Definitions

- “Number of Students Who Began the Program” means the number of students who began a program who were scheduled to complete the program within 100% of the published program length within the reporting calendar year and excludes all students who cancelled during the cancellation period.
- “Students Available for Graduation” is the number of students who began the program minus the number of students who have died, been incarcerated, or been called to active military duty.
- “Number of On-time Graduates” is the number of students who completed the program within 100% of the published program length within the reporting calendar year.
- “On-time Completion Rate” is the number of on-time graduates divided by the number of students available for graduation.
- “150% Graduates” is the number of students who completed the program within 150% of the program length (includes on-time graduates).
- “150% Completion Rate” is the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates, divided by the number of students available for graduation.
- “Graduates Available for Employment” means the number of graduates minus the number of graduates unavailable for employment.
- “Graduates Unavailable for Employment” means the graduates who, after graduation, die, become incarcerated, are called to active military duty, are international students that leave the United States or do not have a visa allowing employment in the United States, or are continuing their education in an accredited or bureau-approved postsecondary institution.
- “Graduates Employed in the Field” means graduates who beginning within six months after a student completes the applicable educational program are gainfully employed, whose employment has been reported, and for whom the institution has documented verification of employment. For occupations for which the state requires passing an examination, the six months period begins after the announcement of the examination results for the first examination available after a student completes an applicable educational program.
- “Placement Rate Employed in the Field” is calculated by dividing the number of graduates gainfully employed in the field by the number of graduates available for employment.
- “Number of Graduates Taking Exam” is the number of graduates who took the first available exam in the reported calendar year.
- “First Available Exam Date” is the date for the first available exam after a student completed a program.
- “Passage Rate” is calculated by dividing the number of graduates who passed the exam by the number of graduates who took the reported licensing exam.
- “Number Who Passed First Available Exam” is the number of graduates who took and passed the first available licensing exam after completing the program.
- “Salary” is as reported by graduate or graduate’s employer.
- “No Salary Information Reported” is the number of graduates for whom, after making reasonable attempts, the school was not able to obtain salary information.



California Institute of EMT
2669 Myrtle Ave #201-203 Signal Hill CA
90755 (562) 989-1520: ciemt.com

STUDENT'S RIGHT TO CANCEL

- **Cancellation and refund policy: STUDENT'S RIGHT TO CANCEL**
- Students are required to submit a two hundred- and fifty-dollar (\$250.00) registration fee as a condition of registration for the Paramedic Preparation Course. Cancellation of attendance in this program will allow the student a full refund only if cancellation is made Ten (10) working days prior to the start date of the class in which the student has registered. If cancellation is made less than ten working days prior to the start date of the course the registration fee is considered non-refundable. Cancellation is defined as sending a date verifiable e-mail to the CIEMT course program directors e-mail address. If the provisions of cancellation described herein are not met the **registration fee is considered non-refundable.** (Matthew Goodman CIEMT Program Director, 562 989-1520, Admin@CIEMT.COM)



California Institute of Emergency Medical Training

Attendance/Testing Standards/Rules and Regulations

This is a Hybrid course and content is cumulative in nature. To succeed, students must keep up with the online course work and attend all assigned Skill Days and Online classroom sessions. While online work can be done at the students chosen time, attendance for all of the Skill Days and Online classroom sessions is MANDATORY! Students MUST ARRANGE THEIR SCHEDULE TO ATTEND THESE MANDATORY SESSIONS.

- A. **Missing any of the Skill Days will result in being dismissed from the course.** Being more than **30 minutes late** for a **Skill Day** is considered missing the entire day and will result in dismissal from the Hybrid EMT Program.
- B. Use of cell phones or text messaging during class time is strictly prohibited. Using a cell phone during Instructional time on either the Skill Days (except at scheduled breaks) will result in you being dropped from the Enhanced Hybrid EMT Program.
- C. CIEMT is a no tolerance school when it comes to violence and sexual harassment. Any violence or documented sexual harassment directed toward instructors or students is cause for dismissal.

Leave-of-absence Policy: Because of the nature of the course, students are not allowed a leave-of –absence. If something occurs and the student is not able to complete the course they are enrolled in, they can drop the class and receive their pro-rated refund if they drop before the 60% point in the course.

Dress code in class: No flip flops and no short dresses on skills days.

Office Location, hours and Contact: The main campus office at 2669 Myrtle Ave. #201 Signal Hill/Long Beach CA 90755 is open from 10:00 am to 3:30pm M to F. You may chat with us through our website ciemt.com or email us at admin@ciemt.com.

Dismissal Policies: If a student is absent for one of the Skill Days they will be dismissed from the program. If the absence occurs prior to the 60% of the course the student will be issued a prorated refund. If the absence occurs after the refund cut off day, no refund will be issued. If the student is dismissed for using a cell phone during class time, documented violence and/or sexual harassment, the above refund policy will apply. An absence will be defined as being more than 30 minutes late for a Skill Day.

Grading Policy for the Hybrid EMT Course

Pass/Fail Standards on Quizzes: All students will be required to have at least an 80% quiz average in order to qualify to take the Final Written Exam. All quizzes are online in the Enhanced Hybrid EMT Program and can be retaken multiple times in order to pass them. Section Tests are also online and only 1 retake is allowed on 3 of the 10 Section Exams. All section test must be completed during the prescribed open period designated for those specific section test. Failure to complete all section test during the prescribed time for those exams may result in dismissal from the course. FEMA ICS 100 & 700 certificates must be submitted by skills day 2 of the program.

Pass/Fail Standard on Final Written Test: All students will be required to score 80% or higher on the Final Written test (held at one of the CIEMT campuses) and successfully pass the Final Practical exam to receive a Certificate of Completion for the EMT Course. One re-take of the final written is allowed if needed only if the student passes the practical exam.

Pass/Fail Standards on Skills Examinations: All students will be required to pass the final skills examinations with 100% proficiency. The standard of 100% proficiency will be graded by evaluation and monitoring of skill time limits and critical criteria for each skill. The student will be allowed 10 minutes to successfully complete each skill. Critical action are a list of actions that must be performed in order for the student to pass his/her final skills exam. Critical action for each skill will be based on the Critical action outlined in Los Angeles County EMS Skills evaluation sheets. Students are allowed to fail 3 skills and will receive one retest on each. If the students fails a skills twice or a 4th skills they will be dismissed from the course.

Makeup Procedures for Quizzes and Tests: All students will be allowed 1 (one) retake on the Final Written Exam. The makeup Final Written Exam will not be re-administered on the same day as the failed Final Written Exam. The Final Written Exam retake exam must however, be taken no later than 7 days after the date they failed the original Final Written Exam.

Dates available will be submitted to the student by school administration. There is an \$80.00 Retake fee for the Final Written Exam.

I _____ (the student) understand and agree to the terms of the CIEMT attendance and grading policy.

Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to: Bureau for Private Postsecondary Education at

1747 N. Market Blvd. Ste. 225, Sacramento California 95834
P.O. Box 980818, West Sacramento CA 95833-0818
Ph (888) 370-7589 or by Fax (916) 263-1897 Ph (916) 431-6959 or
by Fax (916) 263-1897 www.bppe.ca.gov

California Institute of EMT: Field Internship Performance Packet

California Institute of Emergency Medical Training

In an Emergency please contact: 2669 Myrtle Ave. # 201-203 Long Beach, CA 90755 (Main Campus)
(562)989-1520: admin@ciemt.com

Performance standards for clinical and/or ambulance experience

1. Students must complete a minimum of **24** hours of clinical and/or ambulance experience.
2. Students must have a minimum of **10** patient contacts
3. A qualified preceptor must evaluate all Patient contacts.
4. A valid acceptable “patient contact” must include the following performance by the student for each patient:

A. Patient Assessment

B. Patient vitals (B/P, Pulse, Respiratory rate)

5. A valid acceptable “patient contact” must include the following information documented for each patient:

A. Chief complaint

B. Age/sex of the patient

C. Patient Hx. If possible (SAMPLE/OPQRST/ASPN)

D. Skills performed by the student

6. Students must have successfully completed a Health Care Professional or Professional Rescuer CPR program prior to beginning clinical and/or ambulance experience. Student must have their card with them during the ride out.

7. **Dress Code:** All students are to report to their assigned stations wearing dark pants (black or blue) a white shirt, and black shoes. All body piercing must be removed and hair pulled back and secured (if needed). There are no exceptions to the dress code rules! If a student reports to their station unprepared they will be refused access to the ride-along and told to go home.

8. All evaluation forms must be completed and signed by the student’s preceptor just prior to the completion of the ride-along shift. If it does not have an official preceptor signature your ride-along didn’t happen. Be aware that your ride-along is on a working ambulance that is conducting business and administering patient care to real patients. You must be professional at all times and complete all calls. This may require you to stay beyond the mandatory 24 hours if your preceptor is in the middle of a call.



Commonly Asked Criminal Background Questions

1. Which criminal offenses **WILL** exclude an applicant from being eligible for EMT Certification?

- Has been convicted of any sexually related offense specified under Section 290 of the Penal Code
- Has been convicted of murder, attempted murder, or murder for hire
- Has been convicted of two (2) or more felonies
- Is on parole or probation for any felony
- Has been convicted and released from incarceration for offenses during the preceding fifteen (15) years for the crime of manslaughter or involuntary manslaughter
- Has been convicted and released from incarceration during the preceding ten (10) years for any offense punishable as a felony
- Has been convicted of two (2) or more misdemeanors within the preceding five (5) years for any offense relating to the use, sales, possession, or transportation of narcotics or addictive or dangerous drugs.
- Has been convicted of two (2) or more misdemeanors within the preceding five (5) years for any offense relating to force, threat, violence, or intimidation
- Has been convicted within the preceding five (5) years of any theft related misdemeanor

2. Which criminal offenses **MAY** exclude an applicant from being eligible for EMT Certification?

- Has committed any act involving fraud, intentional dishonesty for personal gain within the preceding seven (7) years
- Is required to register pursuant to Section 11590 (Controlled Substance Offender) of the Health and Safety Code
- Conviction of one (1) misdemeanor within the last five (5) years for a related offense listed within the Health and Safety Code, Section 1798.200



Health and Safety Code Violations 1798.200

Any of the following actions shall be considered evidence of a threat to public health and safety **and may result in denial, suspension, or revocation of a certificate or license, or in the placement on probation of a certificate or license holder under this division:**

1. Fraud in the procurement of any certificate or license.
2. Gross negligence.
3. Repeated negligent acts.
4. Incompetence.
5. The commission of any fraudulent, dishonest, or corrupt act that is substantially related to the qualifications, functions, and duties of prehospital personnel.
6. Conviction of any crime that is substantially related to the qualifications, functions, and duties of prehospital personnel. The record of conviction or a certified copy of the record of conviction shall be considered conclusive evidence of the conviction.
7. Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this division or the regulations adopted by the authority pertaining to prehospital personnel.
8. Violating or attempting to violate any federal or state statute or regulation that regulates narcotics, dangerous drugs, or controlled substances.
9. Addiction to, the excessive use of, or the misuse of, alcoholic beverages, narcotics, dangerous drugs, or controlled substances.
10. Functioning outside the supervision of medical control in the field care system operating at the local level, except as authorized by any other license or certification.
11. Demonstration of irrational behavior or occurrence of a physical disability to the extent that a reasonable and prudent person would have reasonable cause to believe that the ability to perform the duties normally expected may be impaired
12. Unprofessional conduct exhibited by any of the followings:
 - o Mistreatment or physical abuse of any patient resulting from excess force in excess of what a reasonable and prudent person trained in a similar capacity would use
 - o Failure to maintain confidentiality
 - o The commission of any sexually related offense under Section 290 PC