**Site Visitor Application***Application Deadline:* August 1, 2017

*Workshop*: November 30-December 1, 2017  
Minneapolis MN

CoAEMSP is seeking applicants to serve as site visitors for the CoAEMSP. The next site visitor workshop will be held in Minneapolis, Minnesota; it will begin with breakfast on Thursday, November 30 and conclude with lunch on Friday, December 1. The CoAEMSP will pay for the food and two nights lodging (Wednesday and Thursday) for the accepted applicants; applicants are responsible for the expense to travel to the workshop.

For consideration, **complete and return the application packet no later than August 1, 2017,** to the CoAEMSP ([jennifer@coaemsp.org](mailto:jennifer@coaemsp.org)). Incomplete packets or late submissions will not be considered. The complete application includes:

This application

A current CV

A letter of support from your employer

Two (2) letters of recommendation

Successfully complete the [CAAHEP Site Visitor quiz](CAAHEP%20Site%20Visitor%20quiz) (<http://quiz.caahep.org>),   
 [*the results are automatically sent to CoAEMSP*]

Acknowledgement of the expectations of a site visitor

In addition, if the applicant is with a CAAHEP accredited Paramedic program, the program must be in good standing. The qualifications of a site visitor are found at end of this document.

**SITE VISITOR PROFILE**

**First Name**:       **MI**:       **Last Name**:       **Suffix**:

**Degrees& Credentials:** (*list the degrees and credentials as you would when professionally listing your name)*:

**Title:**

**Employer:**

**Mailing Address:**

**City:**       **State:**       **Zip Code:**

**Work Phone:**        Release to Program

**Cell Phone:**        Release to Program

**Home Phone:**        Release to Program

**Preferred Phone (CoAEMSP Use):**

**Primary Email:**        Release to Program

**Secondary Email:**        Release to Program

**AREAS OF EXPERTISE**

**Distance Education**

Teaching/Administrative Experience with Distance Education:

Describe your experience with Distance Education:

**Satellite Locations**

Teaching/Administrative Experience with Satellite Locations:

Describe your experience with Satellite Locations:

**Consortium**

Teaching/Administrative Experience with Consortium:

Describe your experience with Consortium:

**Fire Based**

Teaching/Administrative Experience with Fire Based:

Describe your experience with Fire Based:

**APPLICATION**

1. Are you now or have you been a program director or medical director for a Paramedic program?  
     Yes  No If yes,  Program Director

Medical Director

If you answered yes, is/was the program considered in good standing with the CoAEMSP and CAAHEP?

Yes  No If no, please state why you should be considered by the CoAEMSP for the role of site visitor.

1. Is/was the Paramedic program CAAHEP accredited?  Yes  No  Under Consideration

CoAEMSP Program Number: 600

Sponsor/Institution Name, City & State:      

If you are not currently the program director or medical director for a Paramedic program, when did you serve in that capacity?

1. Have you attended a site visitor workshop?  Yes  No  
   Date(s) & Location:
2. Are you a Certified/Licensed Paramedic?  Yes  No  
   Are you a Board Certified Physician?  Yes  No Specialty

*Physician*: Do you have an active unrestricted license?  Yes  No

Other:

1. List your experience in EMS education (education, education programs, dates of experience):

1. Site visitors are expected to participate in at least 3 site visits every 24 months. Do you have any personal or professional impediments to conducting at least 3 site visits in the next 24 months?  Yes  No

If yes, please explain:

1. Check which option below best describes your experience with *self study development*.
   1. I have been the primary author of the self study document at least once.
   2. I have assisted someone else in the development of the self study.
   3. I reviewed our self study document prior to submission.
   4. I have not been involved with the self study document.

1. Check which option below best describes your experience with *annual report preparations*.
   1. I have been the primary individual to collect and collate data for the annual report and have written the report at least once.
   2. I have been the primary individual to collect and collate date for the annual report at least once but someone else has written the report.
   3. I have assisted with the collection of data for the annual report and assisted with writing the report at least once.
   4. I have not participated in the collection of data or writing the annual report.
   5. I have reviewed the data and annual report prior to submission.
2. Check which option below best describers your experience with a site visit by the CAAHEP/CoAEMSP:
   1. I have been the primary individual responsible for planning and implementing the site visit at least once.
   2. I have assisted in the planning and coordination for the site visit at least once.
   3. I was present for and participated in the site visit at least once.
3. Would you be comfortable interviewing physicians, Presidents/CEOs or Deans?  Yes  No

1. Why would you like to serve as a site visitor for CoAEMSP?

1. What would you like the CoAEMSP to know when considering your application for the Site Visitor Workshop?

1. How well do you handle travel disruption that is outside your control (i.e., flight cancellations, delays)?

1. Who accredits Paramedic programs?

For consideration for the CoAEMSP Site Visitor Workshop,return a*completed* application packet by **August 1, 2017**,to[jennifer@coaemsp.org](mailto:jennifer@coaemsp.org). Applications are accepted via email only.

QUESTIONS? Contact **Jennifer** Anderson Warwick | jennifer@coaemsp.org | P: 214-703-8445, x114

**SITE VISITOR QUALIFICATIONS**

**ALL Site Visitors**

* Successful completion of the Site Visitor Training Workshop under the 2015 CAAHEP *Standards.*
* If with a CAAHEP accredited Paramedic program, the program must be in good standing.

**Paramedic Educator**

* Employed as an educator in a CAAHEP accredited Paramedic program, at least 30% employee to the program or if retired and not currently working in a CAAHEP accredited Paramedic program, has worked in EMS education within the past five (5) years.
* At least two (2) years of full-time experience or five (5) years of part-time experience as a Paramedic educator in a CAAHEP accredited Paramedic program.
* Knowledgeable about education issues, especially curriculum, exam development, program evaluation, and student evaluation.
* Minimum of a Bachelor’s degree.
* Qualify as a program director under the 2015 CAAHEP *Standards*.

**Physician**

* Actively involved in a Paramedic education program.
* Knowledgeable about education issues.
* Qualify as a medical director under the 2015 CAAHEP *Standards*.
* If retired and not currently working in a CAAHEP accredited Paramedic program, has worked in EMS education within the past five (5) years.

**To MAINTAIN the status of an active CoAEMSP Site Visitor, ALL are required to:**

* Successfully complete any required Site Visitor Updates.
* Have consistently acceptable quality assurance reports as determined by the Site Visit & Visitor Subcommittee.
* Attend any required CE sessions provided by the CoAEMSP (web-based, in-person, or other format) to ensure continuous compliance with the CAAHEP *Standards and Guidelines*.
* Participate in a minimum of three (3) site visits in a 24-month period.
* If retired and not currently working in a CAAHEP accredited Paramedic program, has worked in EMS education within the past five (5) years.
* If with a CAAHEP accredited Paramedic program, the program must be in good standing.

*Note*: all requirements are subject to the discretion of the Site Visit & Visitor Subcommittee and the Board.

**ACKNOWLEDGEMENT OF THE EXPECTATIONS OF A SITE VISITOR**

I,      , acknowledge the expectations of the CoAEMSP site visitor and agree to participate in a minimum of three (3) site visits in a 24-month period; complete all required Site Visitor Updates; strive for solid quality assurance reports from peers and programs; and attend required CE sessions. I understand that if the CAAHEP accredited Paramedic program with which I work for falls out of good standing with CoAEMSP or CAAHEP, that this may affect my status as a CoAEMSP site visitor.

Name Date