



**ADVANCED/INTERMEDIATE EMT (EMT 199A/B)
APPLICATION**

WINTER & SPRING 2026

Application Period: January 12, 2026, to February 17, 2026

**EMAIL THIS COMPLETED FORM TO: emt@clatsopcc.edu
to begin the application process**

Please review the information on Pages 2 & 3 for details about the application process.

Last Name _____ **First Name** _____ **MI** _____

CCC Student ID Number _____ **Date of Birth** _____

Email Address _____ **Phone #** _____

Class meets in-person on the CCC Lexington campus every Tuesday, Thursday & Friday from 5:30-9:30 p.m. between February 18 and June 12, 2026.

LIST OF REQUIRED DOCUMENTS FOR REGISTRATION:

- Current EMT Basic Certification
- CPR/BLS Certification valid through June 2026
- Immunizations/Titers:
 - Negative TB results
 - Tdap
 - Varicella
 - MMR
 - Hepatitis B
- Background Check
- 10-panel Drug Screen (get form and instructions – Columbia Hall, Room 205)

Applicant Signature: I have reviewed the list of required documents for registration and understand that **I must upload proof of all required items to Castle Branch by February 17, 2026**, to be eligible to begin EMT 199a on February 18, 2026.

Applicant Signature _____ **Date** _____

CLATSOP COMMUNITY COLLEGE
ADVANCED/INTERMEDIATE EMT APPLICATION INFORMATION & REGISTRATION CHECKLIST
WINTER & SPRING 2026

Students wishing to enroll in the EMT 199a and EMT 199b courses at Clatsop Community College should **contact the CCC Admissions Department on the Lexington Campus to establish a student account and get a CCC Student ID Number:**

Email address: admissions@clatsopcc.edu

Phone #: 503-338-2417

Location: First Stop-Columbia Hall, Room 109

Office hours: Mon-Fri - 9 a.m. to 4 p.m.

Once students have a CCC Student ID Number, they can complete and submit the application for consideration. **Class will meet Tuesdays, Thursdays, and Fridays from 5:30-9:30 p.m. from 2/18 to 6/12.**

All requirements listed below are required by the Oregon Health Authority (OHA). **All documentation must be uploaded to Castle Branch before the start of EMT 199a.** (See Page 3 of this form for instructions to establish a Castle Branch account.) *Additionally, applicants must pass a written and practical evaluation of their EMT Basic skills on the first day of the class to remain in the course.*

EMT BASIC CERTIFICATION: Applicants **must upload a copy** of a current Oregon EMT Basic license to Castle Branch.

CPR TRAINING: Applicants **must upload proof** to Castle Branch of current American Heart Association Basic Life Support (BLS) for Healthcare Providers, or CPR for Healthcare Providers, or American Safety & Health Institute (ASHI) for Healthcare Providers, or Red Cross Professional Rescuer CPR card. The card **must be valid through June 2026.**

IMMUNIZATION REQUIREMENTS: Applicants **must upload proof** of the following **immunizations and/or immunity titers** to Castle Branch:

- Negative TB test results within the previous 12 months or negative QuantiFERON results
- TDAP vaccine
- Varicella vaccine
- MMR vaccine (not required if born before 1956)
- Hepatitis B vaccine (3 doses): **at least one dose must be completed before class begins**, and a second dose must be completed before attending off-site rotations. The 2nd dose can be given 30 days after the 1st; the 3rd dose is administered 3-6 months after the 2nd.

BACKGROUND CHECK: Applicants must pass a **State/National Criminal Background Check** before the start of EMT 199a. This background check **is completed automatically** by Castle Branch

DRUG SCREENING: Applicants must complete a **10-Panel Drug Screen** for amphetamines, methamphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, methaqualone, opiates, phencyclidine, and propoxyphene. Testing must be completed with Helena's Drug Screening Services in Astoria before the start of EMT 199a. **Pick up a drug screen testing form to take to Helena's in Columbia Hall, Room 205—email klaughman@clatsopcc.edu with questions.**

*Note: **Students may not register themselves** in EMT 199a. Once students have submitted proof of the items listed above to Castle Branch and the documents have been verified by the EMT Program Coordinator, the EMT department will register students internally. All students will be notified via email once they are accepted and registered in the course*

ESTABLISHING AN ACCOUNT WITH CASTLE BRANCH

COST: \$136 - payable with credit card

Go to: <https://portal.castlebranch.com/LH54>

Click on “Place Order.”

Click on “Please Select.”

Click on “EMT.”

Click on **LH55: Background Check – Drug Test – eLearning – Medical Document Manager**. This package includes a background check, drug test, eLearning modules, and a list of clinical requirements that require uploaded documentation.

NOTE: All components of this tracker must be completed by the start of EMT 199a.

Review the “Package Review” content. Note all items that are marked with a checkmark. Click on “I have read order instructions” at the bottom of the screen, and then “Click to Continue.”

Click on “Create Account” and enter your email address and password. (*NOTE: The email address you enter will be the one used for accessing the account and receiving Castle Branch emails.*) Click “Next” to proceed.

Complete “User Profile” information (legal name, phone #, address). Click “Next” to proceed.

Complete all three “Security Questions.” Click “Complete.”

Review all information for accuracy and click “I have read, understand, and agree to the Terms and Conditions of Use.” Then, click “Continue.”

Review all information one last time for accuracy. (Use the “Edit Order Information” button if revisions are needed.)

1. Complete all “Personal Identifiers.” *NOTE: You must include a Social Security # for the background check along with your date of birth and sex.*
2. Complete all “Student Information.” *NOTE: Select “Undergraduate” as the Designation, enter “EMT” as the Degree/Certification, and enter June 12, 2026, as “Expected Date of Graduation.”*

Click “Next” to proceed.

Confirm that your legal name appears for “County Criminal – *Select CLATSOP COUNTY*,” “Nationwide Healthcare Fraud & Abuse Scan,” “Drug Test,” “Nationwide Record Indicator with SOI,” “Social Security Alert,” “Residency History,” “Medical Document Manager Annual CRR,” and “eLearning Tracker.” Click “Next” to proceed.

Review and confirm your information for accuracy on the next screen. Click “Next” to proceed.

Select “Payment Type” and enter credit card information and billing address to establish an account. Click “Submit” to process and pay.

You will receive confirmation of an account and login information.

Once you have an established account, you can access and upload information by using the DISA/CB website:

<https://disahealthcare.com/?ref=cb>

To access your account, click on “LOGIN” at the top right side of the main page, and then select “DISA CB – Castle Branch.” Click on “DISA-CB login.” Using your new Username & Password, log in to access your account.

Using this account, upload copies of all required documentation to include: 1.) EMT Basic Certification; 2.) proof of immunizations as listed; and 3.) a signed CPR/BLS card. Also, complete any accessible eLearning modules. The background check will be conducted automatically. Stop by Columbia Hall, Room 205, to pick up a hard copy of the document needed for the local Drug Screening process.