

MINERAL AREA COLLEGE

NAME: _____

ID#: _____

**Community Paramedic Program
Certificate**

(Major Code: PD-CR) CIP 51.0904

MO State Paramedic License #: _____

NREMT Paramedic Certification #: _____

Required Courses

<u>Sem/Yr</u>		<u>Grade</u>
_____	CPP2410 Roles & Responsibilities of the Community Paramedic ..2	_____
_____	CPP2422 Community Assessment3	_____
_____	CPP2452 Advanced Assessment Laboratory.....2	_____
_____	CPP2450 Pathophysiology & Chronic Disease Mgt. for the CP5	_____
_____	CPP2460 Community Paramedic Patient Care Capstone.....2	_____

TOTAL CREDIT HOURS: 14

GPA: _____ * *A cumulative 2.0 grade point average is required for a certificate of completion.

ADVISOR SIGNATURE: _____ DATE _____/_____/_____

Student acknowledges graduation policies.

STUDENT SIGNATURE: _____ DATE _____/_____/_____