Student Name_____ **Student ID**_____ **Advisor**_____

2019-20

ARKANSAS STATE UNIVERSITY-NEWPORT
CERTIFICATE OF PROFICIENCY
Emergency Medical Technician (EMT)

A. Possible Prerequisites: None required

B. General Education Core: None required

C. Major Technical Discipline: (10 credit hours)			**Hours**	**Semester**	**Grade**	**Transfer (Univ. / year)**
Course #		**Course Title**				
EMT	1101	Basic EMT Practicum				
EMT	1109	Basic EMT Theory				

Total credit hours _____

Minimum Required Credit Hours (10)