PERCOM/PEMEC CLINICAL PACKET REQUEST FORM

Student Name: _____

Course Level for Rotations (EMT, AEMT, or Paramedic): _____

Once all your clinical documents and 10-panel drug screen have been cleared by the Clinical Assistant, you will receive a Clinical Packet from PERCOM's Executive Assistant's office and an email from the Clinical Coordinator (or her Assistant) with scheduling instructions.

The Clinical Packet will contain items that you MUST have before you can attend any rotation shifts as a PERCOM student. These include:

1. Student ID nametag with your overall course deadline noted on the tag
    - **a.** If you are too close to that deadline now to be able to complete rotations, you may be asked to go to percomcourses.com, Support, and find the Extension Request form and request an extension before the Student ID nametag can be generated. The extension date will need to then be sent to Sherri Carson before your nametag can be made. If your deadline expires after receiving your Clinical Packet but before you complete all rotations, you must request an extension. If you lose your nametag, you will need to contact Sherri Carson and request a new one. **The charge for any nametag after the first one to the student will be $15.00 plus mailing.**
    - **b.** **Be aware that you must RETURN the nametag (or nametags) after you have completed rotations and prior to being marked clear to graduate. You will need to mail this to Sherri Carson at her preferred address WITH TRACKING and send the tracking number to both ea@percomonline.com and programdirector@percomonline.com.**

2. One PERCOM student uniform shirt
    - a. All students are supplied one uniform shirt free of charge. If you wish to have more than one, you should email ea@percomonline.com and make arrangements to have more than one shipped to you and pay the fee for the extra shirt(s) and shipping.

To make sure your Clinical Packet can be sent without unnecessary delays, we will need the following information/items, and this form will need to be uploaded with all your other Clinical Registration documents for clearance.

1. **Head shot photo**
    - **a.** This has to be on a solid white or light-colored background in PDF format. It may be taken as a selfie but should be only head and shoulders and must look professional. Photos with inappropriate clothing, symbols, wording, graphics, or

not on a solid light-colored background, or not of just your head and shoulders will not be accepted. You must upload this on the Clinical Registration page.

2. **Shirt size**, (Ours are a unisex, knit non-shrinkage polo, and currently **they run a little large so keep that in mind.**) Check the appropriate size below in the blank BEFORE the size you want.

_____ Small _____ Medium _____ Large _____ XLarge _____ XXL

_____ 3XL _____ 4XL _____ 5XL (if available)

3. **Best Shipping Address for your Clinical Packet**
   a. Please type in below where you will need your Clinical Packet shipped. You will also receive tracking information from USPS to your email that is on file with us on our course roster. Be SURE this information below is correct.

_____ (name)

_____ (street address – no P.O. Boxes)

_____ (apartment or suite number if applicable)

_____ (city) _____ (state) _____ (zip)