

LAKE TECHNICAL COLLEGE

EMERGENCY MEDICAL TECHNICIAN PROGRAM

STATEMENT OF UNDERSTANDING

I attest that I have received a copy of the Lake Technical College EMT Program's Master Plan of Instruction and Code of Student Conduct. I know it is my responsibility to understand the rules and regulations and any infractions of the aforementioned rules and regulations may result in disciplinary actions as outlined in the Master Plan of Instruction. I also understand that I cannot be a user of tobacco and enrolled in this program.

STUDENT'S NAME - PRINTED

DATE

STUDENT'S SIGNATURE

LAKE TECHNICAL COLLEGE STAFF

DATE