

## Emergency Medical Services

Fall 2021



### EMT Training

Needing additional skills for EMT? These classes are for you. Aspirin administration, epinephrine auto-injector, non-visualized advanced airway management, continuous positive airway pressure, glucometer, intravenous fluid monitoring only, peripheral intravenous access and monitoring and albuterol nebulizer and epinephrine auto-injector administration course.

**Keyword: EMT**

#### EMT Medication Administration Epi, Albuterol & Naloxone

Oct. 30	S	8-11 a.m.	\$35
Hebron, HNLC, 102		EMTL-3258-HNFA	

#### Diabetic Assessment & Glucometer for the EMT

Oct. 30	S	11 a.m.-12:30 p.m.	\$25
Hebron, HNLC, 102		EMTL-3259-HNFA	

#### Non-Visualized Advanced Airway Management for the EMT

Oct. 30	S	1-5 p.m.	\$45
Hebron, HNLC, 102		EMTL-3032-HNFA	

### EMT Refresher

This EMT Refresher 20-hour course meets the National Registry and state requirements for renewal.

**Keyword: EMT**

Oct. 8 &	F	6-10 p.m.	\$249
Oct. 9-10	S, U	8 a.m.-4 p.m.	
Hebron, HNLC, 103		Caldwell EMTL-3333-HNFA	

### Location Key

Hebron, HNLC.....Learning Center at Hebron, 610 Jefferson Ave.

For more information, contact **Crystal Fangmeier** at 800-828-0072, ext. 5591, or [cfangmeier@southeast.edu](mailto:cfangmeier@southeast.edu)

Check out all classes offered at [www.southeast.edu/HebronLC](http://www.southeast.edu/HebronLC)  
Find us on Facebook at [www.facebook.com/SCCLearningCenteratHebron](http://www.facebook.com/SCCLearningCenteratHebron)

**Cancellation/Refund Policy:** You must call the Continuing Education office at 402-437-2700 or 800-828-0072 the day before the class begins to receive a 100% refund. If you call the day of the class or after it has started, no refund will be issued. If a class is cancelled or student drops (according to the refund policy), refunds will be issued to the student, unless a third party has been formally billed by SCC Business Office. **ADA Reasonable Accommodations:** SCC provides services and reasonable accommodations to allow persons with disabilities to participate in educational programs and other College activities. For information on requesting ADA reasonable accommodations, contact the SCC Area Access/Equity/Diversity Office.



## Registration Form - Non-Credit Course

Today's Date

Complete this form with payment information and send via mail to Southeast Community College, Continuing Education, 301 S. 68th St. Place, Lincoln, NE 68510 OR FAX to 402-437-2703

PLEASE PRINT

The College requests, but does not require, a student provide their Social Security number during the admissions process. Visit [www.southeast.edu/collegecatalog](http://www.southeast.edu/collegecatalog) for additional information.

Social Security Number OR SCC Student ID Number		Birth Date	Name: Last		First	Middle Initial
Residence Mailing Address			City	State	Zip	County #
Email Address		Cell Phone		<input type="checkbox"/> Home <input type="checkbox"/> Business Phone		
I identify as: <input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Nebraska Resident <input type="checkbox"/> Non-Resident		Ethnicity (select one): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		Race (Select one or more): <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Black/African-American

COURSE NUMBER	TITLE	START DATE	COST
-	-	-	\$
-	-	-	\$
-	-	-	\$
-	-	-	\$

### SIGNATURE

Check  Cash  Mastercard  AMEX  Discover  VISA V Code \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Exp. Date \_\_\_\_\_ CC # \_\_\_\_\_

Billing agency (INCLUDE LETTER OF AUTHORIZATION ON COMPANY LETTERHEAD)  
For the protection of your personal credit card information, do not email this form to SCC. If faxing, only use the fax number listed or verify with SCC before using another SCC fax number.

Would you like a receipt mailed to you?  
 Yes  No

SCC Staff Tuition Waiver	( )
<b>TOTAL DUE</b>	

FOR OFFICE USE ONLY	
ID#	_____
DE	_____

Submission of this form indicates that I understand: 1) that my registration is complete and that I am accountable for the tuition and fees and subject to a grade in the courses listed; 2) that should I officially drop, cancel, or withdraw, any refund in tuition will be determined by the date I submit my request to Continuing Education; 3) that failure to attend a course does not constitute an official drop/withdrawal; 4) the personal information contained herein is correct as shown; and 5) any changes in SSN, legal name, address, residency, etc. must follow the College procedures in the Student Handbook and College Catalog. It is the policy of SCC to provide equal opportunity and nondiscrimination in all admission, attendance, and employment matters to all persons without regard to race, color, religion, sex, age, marital status, national origin, ethnicity, veteran status, sexual orientation, disability, or other factors prohibited by law or College policy. Inquiries concerning the application of SCC's policies on equal opportunity and nondiscrimination should be directed to the Vice President for Access/Equity/Diversity, SCC Area Office, 301 S. 68th St. Place, Lincoln, NE 68510, or [jsoto@southeast.edu](mailto:jsoto@southeast.edu).

# Register Online for SCC Continuing Education Classes

You must have an email account to register online.

1. Go to <http://bit.ly/RegisterCE>.
2. **Search for your class** by entering either a **key word** in the title or the **course number**. Click **Submit**. (Enter information in only one field for broader results.)  
Key Word Example: *Driver*  
Course Number Example: *TRAN-3398*
3. **Select the course** for which you wish to register. Click **Submit**.
4. Enter your **personal information, certify your identification** and click **Submit**.  
\* You must provide your Social Security Number.
5. *Optional*: Enter your **Additional Registration Information** and click **Submit**.
6. If you want to register for additional classes, select **Search for more classes** under "Choose one of the following." If you are finished selecting the class(es) for which you want to register, select **Register now (check out)**. Select your **Payment Type**. Click **Submit**.
7. Enter your **payment information**. Click **Submit**.

You will see your **class acknowledgement** with information about your **SCC Student ID Number, SCC User ID** and **password**. **Print** this page for your records.

In the future it will be easy to register by logging in using your SCC User ID and password and it will not be necessary to provide your Social Security number again.

If you have problems getting registered, please call 402-437-2700 or 800-828-0072 for assistance.



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301 S. 68th St. Place, Lincoln, NE 68510  
402-437-2700 • 800-828-0072 • FAX 402-437-2703  
[www.southeast.edu/continuing](http://www.southeast.edu/continuing)

\* The College requires a student's Social Security number as a condition for enrollment. A student's Social Security number information constitutes an "educational record" under FERPA.