

TO: President
FROM: Ruth Goodin
DATE: 01/15/16

It is recommended that the following not-for-credit/instructional program to be supported by fees be approved:

Activity Title: EMT Refresher Skills Sign-Off

Description:

LMC EMT Graduates will participate in a short refresher course and will be tested in skills needed for their continued EMT certification, certificates will be awarded upon successful completion of testing.

Location of Activity:

Los Medanos College

Date(s):

TBD

Fee:

\$95 Per Student

Professional Expert's Name/Address:

Gretchen Medel
2700 E. Leland Road
Pittsburg, CA 94509

Payment Basis (check one):

- Hourly Rate \$ _____
- 40 Percent of Fees
- 50 Percent of Fees
- 60 Percent of Fees

College Faculty Senate Review _____
Signature

Date _____

Approved by President _____
Signature

Date _____

For College Office Use

Governing Board Information Report Date _____

Professional Expert Information:

Check one:

- Current Employee (BP 2027)
- Current Classified Employee*
- New Classified Employee*

* Personnel Requisition, Form 4cd-2, Submitted _____
Date

Percent of Fees Employment Option

Payment Form 4cd-46 Submitted _____
Date

Hourly Rate

Professional Expert Time Card Submitted _____
Date

DISTRIBUTION
White - College Office
Canary - President