## SCHOOL NAME SCHOOL ADDRESS

Telephone:	FAX:
relephone.	I AA.

## **ENROLLMENT AGREEMENT**

Student's Name:		Social Security Number:
Address:		Email Address:
Telephone: Program Title:		Total Program Hours:
Start Date:		End Date:
Class Schedule:	Monday – Friday	Saturday
Class Scriedule.	(9:00 AM – 4:00 PM)	(9:00 AM – 4:00 PM)
There is a non-ref	•	This fee is not part of tuition. The tuition will cover the
		percent of the total tuition payable on or before the first day
		funded if the applicant cancels this contract within three (3)
	· · · · · · · · · · · · · · · · · · ·	e registration fee, is applicable even if instruction has begun.
Fees:	Registration:	\$
	Tuition:	
	Books:	\$ \$ \$
	Tools/Supplies:	Ś
	Other (Test/Licensing/Inoculation)	Ś
	Total	\$
The school has red	ceived the sum of \$	
	This balance is to be paid within	
	d ending on, 2	
Complaint Resolut		
notify the student		rector within days of event. The school director will en complaint of the procedures that the student and neerns.
Tuition Refund Po	licy	
		dance in courses/programs exceeding 300 hours, but not
		y retain the registration fee and a portion of the monies paid
-	The state of the s	of must be notified in writing within five (5) business days of
		owing refund policy in the event of notification by the student
		ol prior to completion of the course or program:
		, , ,
<u>Time of Withdraw</u>		Student's Responsibility
	ness days of signing this contract	0% of total tuition plus the registration fee
During the first we		10% of total tuition plus the registration fee
Weeks two and th		20% of total tuition plus the registration fee
After three weeks	·	45% of total tuition plus the registration fee
	ram and before 50%	70% of total tuition plus the registration fee
After 50% of progr	ram is completed	100% of total tuition plus the registration fee
The following cert	ificate(s)/license(s) and/or professional ( program(s):	credential(s) will be available upon completion of the

The student agrees to maintain regular attendance and to abide by the rules and regulations of the school. The student understands that regular attendance is the obligation of the student and the school's policy regarding absence and make-up as stated in the school catalog will apply. Violation of school rules and regulations may subject the student to dismissal.

ABC School's post-training placement information is available at <a href="https://www.njtopps.com">www.njtopps.com</a>.

In the event of an unannounced school closure, students enrolled at the time of the closure must contact the Department of Labor and Workforce Development's Training Evaluation Unit within ninety (90) calendar days of the closure. Failure to do so within the ninety (90) days may exclude the student from any available form of assistance. Please contact the Training Evaluation Unit via email at <a href="mailto:trainingevaluationunit@dol.nj.gov">trainingevaluationunit@dol.nj.gov</a>.

The student acknowledges receiving a copy of this agreement, the school catalog, and written confirmation of acceptance prior to signing this contract. The student, by signing this contract, acknowledges that he/she has read this contract and understands the terms and conditions and agrees to the conditions outlined in this contract. Signing of this contract by the school is written confirmation by the school that the above named student has been approved to enter the above named program(s). This agreement is not binding until three business days after signing by both parties. The student and the school shall retain a copy of this agreement.

School Director's Signature	Date	Applicant's Signature	Da