



MEDICAL TRAINING INSTITUTE

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Email: medicaltraininginstitute10@gmail.com

www.medicaltraining.com

STUDENT INFORMATION:

NAME: _____

ADDRESS: _____

TELEPHONE: _____ (E-MAIL) _____

PROGRAM INFORMATION:

PROGRAM TITLE: _____

CLOCK HOURS: _____

CLASS SCHEDULE: _____

PROGRAM LENGTH (WEEKS) _____

STARTING DATE: _____

ANTICIPATED ENDING DATE: _____

CANCELLATION AND REFUND POLICY:

Should the student be terminated or program canceled for any reason, all refunds will be made according to the following refund schedule:

1. Cancellation must be made in person or by certified mail.
2. All monies will be refunded if the school does not accept the applicant or if the student cancels within three (3) business days after signing the Enrollment Agreement and making initial payment.
3. Cancellation after the third business day, but before the first class, will result in a refund of all monies paid with the exception of the registration fee.
4. A student canceling after attendance has begun, but prior to 50% completion of the program, will result in a Pro-Rata refund computed on the numbers of hours completed to the total program hours.
5. Cancellation after completing 50% of the program will result in no refund.
6. Termination date: the termination date for refund computation purposes is the last date of actual attendance by the student unless earlier written notice is received.
7. Refunds will be made within 30 days of termination or receipt of Cancellation Notice.
8. A student can be dismissed, at the discretion of the director of admissions, for insufficient progress, nonpayment of costs, or failure to comply with rules.
9. If the school terminates a program for any reason, the student will receive a 100% refund on monies paid to the school.
10. For a student who is on a leave of absence, the termination date is the date the student was scheduled to return from the leave of absence and failed to do so.
11. Uniforms, Lab Supplies, and Books are not refundable.

GRADUATION POLICY:

Upon satisfactory completion of all academic requirements and tuition obligations, the student is awarded a Diploma and transcript. All students must show proof of completion of HIV/AIDS and CPR prior to graduation. Also, student understands that in order to graduate from the program and to receive a diploma, student must successfully complete the required number of scheduled clock hours as a specified in the catalog and on the Student Enrollment Agreement, pass all written and practical examination with a 75% average and satisfy all

financial obligations to the School. The School does not guarantee employment, but will make every effort to assist students with job placement opportunities.

TERMINATION POLICY:

Students will be terminated if, after having been put on Academic or Attendance probation, they fail to meet Attendance of Grade requirements by the 15-day deadline. Fifteen days begins from the date of notification of probation. Also, student agrees to comply with other rules and policies and understands that the School shall have the right to terminate this contract and student’s enrollment at any time for violation of rules and policies as outlined in the catalog. Student also understands that the School reserves the right to modify the rules and regulation, and that student will be advised of any and all modification.

EMPLOYMENT ASSISTANCE

I understand that the School has not made and will not make any guarantees of employment or salary upon my graduation. The School will provide me with placement assistance, which will consist of identifying employment opportunities and advising me on appropriate means of attempting to realize these opportunities.

FINANCIAL INFORMATION:

All prices for programs are printed herein. There are no additional carrying charges, interest charges, or service charges connected or charged with any of these programs. Contracts are not sold to a third party at any time. Cost of credit is included in the price costs for the good and services.

TUITION \$ _____
REGISTRATION FEE \$ _____
BOOKS AND MATERIALS \$ _____
OTHER COSTS \$ _____
TOTAL PROGRAM PRICE \$ _____

METHOD OF PAYMENT

- () Full payment at time of signing of enrollment agreement.
- () Registration fee at time of signing of enrollment and balance is paid before class begins
- () Registration fee at time of signing of enrollment agreement with balance paid prior to graduation by a payment plan

Annual Percentage Rate _____ %	Finance Fee \$ _____	Amount Financed <i>The dollar amount the credit provided to you or on your behalf.</i> \$ _____	Total Payment <i>The amount you will have paid after you have made all payments as scheduled.</i> \$ _____	Total Sales Price <i>The total cost of your purchase and credit including your down payment of</i> \$ _____
Payment Schedule:				
Number of Payments	Amount Per Payment	Payment Due Dates		
	\$ _____	Beginning Thereafter	and on the same day of each	

NOTICE TO BUYER: DO NOT SIGN THIS CONTRACT BEFORE YOU READ IT OR IF IT CONTAINS ANY BLANK SPACES. YOU ARE ENTITLED TO AN EXACT COPY OF THE CONTRACT YOU SIGN. KEEP IT TO PROTECT YOUR LEGAL RIGHTS.

BY SIGNING THIS CONTRACT I AM ACKNOWLEDGING THAT I HAVE REVIEWED THIS CONTRACT, AGREE WITH THE CONTRACT, AND HAVE RECEIVED A COPY OF THE CONTRACT. ADDITIONALLY, BY SIGNING THIS CONTRACT I AM ACKNOWLEDGING THAT I HAVE REVIEWED THE SCHOOL CATALOG AND HAVE RECEIVED A COPY OF THE SCHOOL CATALOG.

Student's Signature

Date

Parent/Guardian Signature if student is under 18 years of age

Date

ACCEPTED BY:

School Official Signature

Date

