

**ENROLLMENT AGREEMENT**  
**Anderson Academy of Dental Assisting, LLC**  
 8284 Beechmont Avenue  
 Cincinnati, Ohio  
 (513)882-2792  
 FAX (513) 231-3925  
 AndersonAcademyDentalAssisting@gmail.com  
 Registration #12-05-1989T

Student Name: \_\_\_\_\_

**Present Address:**

\_\_\_\_\_  
 \_\_\_\_\_

Telephone (home): \_\_\_\_\_

(Cell) \_\_\_\_\_

Social Security No.: \_\_\_\_\_

**Permanent Address:**

\_\_\_\_\_  
 \_\_\_\_\_

(work) \_\_\_\_\_

Date of Birth: \_\_\_\_\_

E-mail: \_\_\_\_\_

**PROGRAM INFORMATION:**

Program: Dental Assisting  
 Program Length: 128 hours  
 (Specified in clock hours) – 13 weeks

Start Date: \_\_\_\_\_

Completion Date: \_\_\_\_\_

**TUITION:**

The total cost for the Dental Assisting program:

Tuition:	\$ 3700.00
Administration/Registration Fee	\$ 125.00
Books/Supplies	\$ 175.00
Total Program Costs	\$4,000.00

**The registration fee must accompany the enrollment agreement to secure a space in the program. Administrative fee of \$100.00 will be waived upon signing enrollment agreement with full payment of tuition. The total amount of \$4,000.00 must be paid prior to issuance of certificate upon completion of the course. Cancellation and refund policy will follow the same format as discussed in the Catalog and Enrollment Agreement.**

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Tuition and fee charges are subject to change at the schools discretion. Any tuition or fee increases will become effective for the school term following student notification of the increase.

**TUITION PAYMENTS:**

To assist students who are financially not capable of paying the full tuition up front, the school will offer an easy interest free installment payment plan. These terms are available to all students who need assistance. The plan will consist of four (4) installments:

1 <sup>st</sup> installment upon enrollment	-	\$ 1,000.00
2 <sup>nd</sup> installment on the 4 <sup>th</sup> week of class	-	1,000.00
3 <sup>rd</sup> installment on the 8 <sup>th</sup> week of class	-	1,000.00
4 <sup>th</sup> installment on the 12 <sup>th</sup> week of class	-	<u>1,000.00</u>
<b>Total Payment</b>		<b>\$ 4,000.00</b>

**LATE PAYMENTS:**

Installment payments not received 10 days after the due date shall incur a five percent (5%) penalty of the amount due.

**CANCELLATION AND REFUND POLICY:**

(To comply with R4-39-308 and R4-39-404)

Rejection: An applicant rejected by the school is entitled to a refund of all monies paid.

Five-Day Cancellation: An applicant who withdraws within five business days (excluding Saturday, Sunday and federal or state holidays) is entitled to a refund of all monies paid. No later than 30 days of receiving the notice of cancellation, the school shall provide the 100% refund.

Other Cancellations: (Required by R4-39-404A) An applicant requesting cancellation more than five days after signing an enrollment agreement and making an initial payment, but prior to entering the school, is entitled to a refund of all monies paid.

**Refund after the commencement of classes:**

1. **Procedure for withdrawal/withdrawal date:**
  - A. A student choosing to withdraw from the school after the commencement of classes is to provide **written notice** to the Director of the school. The notice is to indicate the expected last date of attendance and be **signed and dated by the student**.
  - B. For a student who is on authorized Leave of Absence, the withdraw date is the date the student was scheduled to return from the Leave and failed to do so.

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- C. A student will be determined to be withdrawn from the institution if the student has not attended any class for 6 consecutive class hours.
- D. All refunds will be issued within 30 days of the determination of the withdrawal date.

## 2. Tuition charges/refunds:

- A. Before the beginning of classes, the student is entitled to a refund of \$100% of the tuition.
- B. After the commencement of classes, the tuition refund amount shall be determined as follows:

(1) A student who withdraws before the first class and after the 5-day cancellation period shall be obligated for the registration fee.

(2) A student who starts class and withdraws before the academic term is 15% completed will be obligated for 25% of the tuition and refundable fees plus the registration fee.

(3) A student who starts class and withdraws after the academic term is 15% but before the academic term is 25% completed will be obligated for 50% of the tuition and refundable fees plus the registration fee.

(4) A student who starts class and withdraws after the academic term is 25% complete but before the academic term is 40% completed will be obligated for 75% of the tuition and refundable fees plus the registration fee.

(5) A student who starts class and withdraws after the academic term is 40% completed will not be entitled to a refund of the tuition and fees.  
the academic term is 40% completed will not be

The school shall make the appropriate refund within thirty days of the date the school is able to determine that a student has withdrawn or has been terminated from a program.

Refunds shall be based upon the last date of a student's attendance or participation in an academic school activity.

**Books and Supplies:** There is no refund for any equipment, books and supplies received by the student.

**Refunds** will be issued within 30 days of the date of student notification, or date of school determination (withdrawn due to absences or other criteria as specified in the school catalog), or in the case of a student not returning from an authorized Leave of

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Absence (LOA), within 30 days of the date the student was scheduled to return from the LOA and did not return.

**Special Cases:** In case of prolonged illness or accident, death in the family, or other circumstances that make it impractical for the student to complete the program, the school may make a settlement which is reasonable and fair (this language optional).

**Holder in Due Course Statement:**

Any holder of this consumer credit contract is subject to all claims and defenses which the debtor could assert against the seller of goods or services obtained pursuant hereto or with the proceeds, hereof Recovery hereunder by the debtor shall not exceed amounts paid by the debtor (FTC Rule effective 5-14-76).

**3. GRIEVANCE PROCEDURE**

The School Director will be available to discuss any problems or complaints brought forth by any student. If the matter remains unresolved after conferring with the school Director, the following steps will be taken:

- Submit a written description of the complaint to the School Director
- Within 14 days of the written complaint, the School Director will appoint a Review Board consisting of the School Director, the School Registrar, the Lead Clinical Instructor and two students. The School Director will serve as Chairman.
- Within 7 days, the School Director will convene to discuss the problem and interview the complainant.
- Within 14 days of the meeting, the Board will render its decision. The Board's decision is final.
- If the student is not fully satisfied with the Board's resolution of the complaint, he/she may choose to submit a grievance in writing with the State of Ohio Board of Career Colleges and Schools. The student must contact the State Board for procedures in filing a complaint. Whether or not the problem or complaint has been resolved to his/her satisfaction by the school, the student may direct any problem or complaint to the Executive Director at:

State of Ohio Board of Career Colleges and Schools  
30 East Broad Street, Suite 2481 Columbus, Ohio 43215-3138  
(614) 466-2752 Toll Free (877) 275-4219

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### **THE STUDENT UNDERSTANDS:**

1. The School does not accept credit for previous education, training, work experience (experimental learning), or CLEP (if applicable).
2. The School does not guarantee job placement to graduates upon program/course completion or upon graduation.
3. The School reserves the right to reschedule the program start date when the number of students scheduled is too small.
4. The School will not be responsible for any statement of policy or procedure that does not appear in the School catalog.
5. The School reserves the right to discontinue any students' training for unsatisfactory progress, nonpayment of tuition or failure to abide by School rules.
6. Information concerning other Schools that may accept the School's credits toward their programs can be obtained by contacting the office of the President. It should not be assumed that any programs described in the School catalog could be transferred to another institution. The School does not guarantee the transferability of credits to a college, university or institution. Any decision on the comparability, appropriateness and applicability of credits and whether they should be accepted is the decision of the receiving institution.
6. This document does not constitute a binding agreement until accepted in writing by all parties.

### **STUDENT ACKNOWLEDGEMENTS:**

1. I hereby acknowledge receipt of the **AADA's** school catalog, which contains information describing programs offered, and equipment/supplies provided. The school's catalog is included as a part of this enrollment agreement, and I acknowledge that I have received a copy of this catalog. \_\_\_\_\_ **Student's initial**
2. Also, I have carefully read and received an exact copy of this enrollment agreement. \_\_\_\_\_ **Student's initial**
- 3, I understand that the School may terminate my enrollment if I fail to comply with attendance, academic and financial requirement or if I disrupt the normal activities of the School. While enrolled in the School, I understand that I must maintain Satisfactory Academic Progress as described in the School catalog and

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that my financial obligation to the School must be paid in full before a certificate may be awarded. \_\_\_\_\_ **Student's initial**

4. I also understand that this institution does not guarantee job placement to graduates upon program/course completion or upon graduation.  
\_\_\_\_\_ **Student's initial**

5. I hereby acknowledge that I understand the institutions grievance policy.  
\_\_\_\_\_ **Student's initial**

**CONTRACT ACCEPTANCE:**

I, the undersigned, have read and understand this agreement and acknowledge receipt of a copy. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreements and may not be modified without the written agreement of the student and the School Official. I also understand that if I default upon this agreement I will be responsible for payment of any collection fees or attorney fees incurred by Anderson Academy of Dental Assisting, LLC.

My signature below signifies that I have read and understand all aspects of this agreement and do recognize my legal responsibilities in regard to this contract.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Anderson Academy of Dental Assisting  
Signature of School Official

\_\_\_\_\_  
Date

School Representative's certification: I hereby certify that \_\_\_\_\_ has been interviewed by me and in my judgment, meets all requirements for acceptance as a student. I further certify that there have been no verbal or written agreements or promises other than those appearing on this agreement.

By: \_\_\_\_\_ Date: \_\_\_\_\_