

## ENROLLMENT AGREEMENT

### Registration Form / School Policy

1. Minimum of 18 years of age and have completed high school, college or GED to attend the school.
2. **Tuition** includes: Book, power point handouts, scrubs, name badge, extra time for practice and review.

|   |                |
|---|----------------|
| • <u>Basic Didactic</u>                               |                |
| • Tuition   | \$225          |
| • Registration - non-refundable                       | \$175          |
| • Equipment Fee                                       | \$150          |
| • Student Tuition Recovery Fund STRF (non-refundable) | \$0            |
| • Advance Didactic                                    | \$550          |
| • Clinical Externship                                 | \$650          |
| • Test Fee  | \$115          |
| • Sitting Fee   | \$30           |
| • State Fee   | \$100          |
| <b>Grand Total</b>                                    | <b>\$1,995</b> |

3. **Class hours** Basic 20 Saturday & Sunday 8am-5pm. Completing 4 hours on 3<sup>rd</sup> day after the adv. 8am-12pm.
4. **Class hours** Advanced- 20 Saturday & Sunday 8am-5pm. On the 3<sup>rd</sup> day the hours are 1pm -5pm.
5. In the event the student is unable to attend one day; make-up hours will be provided with prior notification.
6. Classes are instructed by licensed medical professionals, with experience in laboratories & phlebotomy.
7. Continuing Education Units will be included for Board Certified Nurses, and Certified Medical Assistants.
8. There is a \$25 service charge for all returned checks.
9. **Withdrawal Policy/Refund Policy/STUDENTS RIGHT TO CANCEL:** This Institution shall refund 100 percent of the amount paid for institutional charges, less a reasonable deposit or application fee not to exceed two hundred fifty dollars (\$250), if notice of cancellation is made through attendance at the first-class session, or the seventh day after enrollment, whichever is later. The institution shall have a refund policy for the return of unearned institutional charges if the student cancels an enrollment agreement or withdraws during a period of attendance. The refund policy for students who have completed 60 percent or less of the period of attendance shall be a pro rata refund. The institution shall pay or credit refunds within 45 days of a student's cancellation or withdrawal. All notices of cancellations or withdrawal must be presented in writing direct to: Wagner Training Institute, Inc. 1040 Nevada Street 306, Redlands, CA 92374. If the student has received Federal student financial aid funds, the student is entitled to a refund of moneys not paid from Federal student financial aid program funds.
10. If the student obtains a loan to pay for an educational program. The student will have the responsibility to repay the full amount of the loan plus interest, less the amount of any refund. Further, if the student defaults on a Federal or State loan, both the following may occur:
  - The Federal or State government or a loan guarantee agency may take action against the student, including garnishing an income tax refund; and
  - The student may not be eligible for any other government financial assistant at another institution until the loan is repaid.
11. **NONREFUNDABLE CHARGE:** Registration fee of \$175.
12. **Registration form is legally binding once signed by students & accepted by Wagner Training Institute, Inc. Students may take up to 12 months to complete, only if active with review and practice sessions.**
13. Disclosure: "We are approved and registered with the State of California. Registration/approved means we have met certain minimum standards imposed by the state for registered schools based on our written application to the state. Registration does not mean we have met all of the more extensive standards required by

the state for schools that are approved to operate or licensed or that the state has verified the information we submitted with our registration form."

14. Children, non-students and pets are not allowed to attend any sessions including signing up for the National Test, completing the State application process or review mock testing. Students are required to be attentive and participate. Cell phones and electronic devices are to be turned off and recording devices are not allowed. If a student is unable to attend any specific days or hours of the course, they will need to make up the exact hours missed the following month.
15. Students may be expelled from the program without refund for the following reasons, which include but not limited to objective symptoms of drug or alcohol use, profanity, inappropriate/unprofessional threatening or aggressive behavior, cheating, stealing, fighting, of or any other just cause.
16. Wagner Training Institute, Inc. reserves the right to modify program dates and locations for each course (basic and advance) without notice to meet operational needs. Fees are subject to change without notice.
17. The health care profession operates under a strict drug-free policy. To safely and effectively perform their duties, health care workers must be focused and unimpaired. It is our policy, therefore, that all students are subject to random drug testing. Any presence of illegal drugs or narcotics in a student's system or any objective symptoms of drug or alcohol use, is grounds for dismissal from the program without refund. By signing this form and enrolling in the course, you agree to the policies and procedures. Prior to signing the registration form, any student requesting clinical externship hours with employer, will only be permitted with "work experience".
18. California Department of Public Health Laboratory Field Services may require a criminal background including felonies or misdemeanors. Failure to disclose pertinent information prior to registration will result in no refund.
19. Due to liability insurance coverage, once the student has submitted the State application process, pending his or her CPT 1 license, students will not be permitted to return to the class for stick practice or class review.
20. A student or any member of the public may file a complaint about this institution with the Bureau for Private Postsecondary Education by calling (888) 370-7589 toll-free or by completing a complaint form, which can be obtained on the bureau's internet web site [www.bppe.ca.gov](http://www.bppe.ca.gov).
21. Any questions a student may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to the Bureau of Private Postsecondary Education at 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833, [www.bppe.ca.gov](http://www.bppe.ca.gov), toll free number (888) 370-7589 or by fax (916) 263-1897.
22. Wagner Training Institute, Inc. does not offer distance education program.
23. NOTICE CONCERNING TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT OUR INSTITUTION:
24. The transferability of credits you earn at Wagner Training Institute, Inc., is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the certificate you earn in the Phlebotomy program is also at the complete discretion of the institution to which you may seek to transfer. If the certificate that you earn at this institution are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all your coursework at that institution. For this reason, you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending Wagner Training Institute, Inc., to determine if your certificate will transfer.
25. As a student, you must pay the state imposed assessment for the Student Tuition Recovery Fund (STRF) if all the following applies to you:
  - You are a student in an educational program, who is a California resident, or are enrolled in a residency program, and prepay all or part of your tuition either by cash, guaranteed student loans, or personal loans.
  - Your total charges are not paid by any third-party payer such as an employer, government program or other payer unless you have a separate agreement to repay the third party.You are not eligible for protection from the STRF and you are not required to pay the STRF assessment if either of the following applies:
  - You are not a California resident, or are not enrolled in a residency program.

- Your total charges are paid by a third party, such as an employer, government program or other payer, and you have no separate agreement to repay the third party.

The State of California created the Student Tuition Recovery Fund (STRF) to relieve or mitigate economic losses suffered by students in educational programs who are California residents, or are enrolled in a residency programs attending certain schools regulated by the Bureau for Private Postsecondary and Vocational Education. You may be eligible for STRF if you are a California resident or are enrolled in a residency program, prepaid tuition, paid the STRF assessment, and suffered an economic loss because of any of the following:

- The school closed before the course of instruction was completed.
- The school's failure to pay refunds or charges on behalf of a student to a third party for license fees or any other purpose, or to provide equipment or materials for which a charge was collected within 180 days before the closure of the school.
- The school's failure to pay or reimburse loan proceeds under a federally guaranteed student loan program as required by law or to pay or reimburse proceeds received by the school prior to closure in excess of tuition and other costs.
- There was a material failure to comply with the Act or this Division within 30 days before the school closed or, if the material failure began earlier than 30 days prior to closure, the period determined by the Bureau.
- An inability after diligent efforts to prosecute, prove, and collect on a judgment against the institution for a violation of the Act.” However, no claim can be paid to any student without a social security number or a taxpayer identification number.

THE TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE-----\$1995.00

THE ESTIMATED TOTAL CHARGES FOR THE ENTIRE EDUCATIONAL PROGRAM-----\$1995.00

THE TOTAL CHARGES THE STUDENT IS OBLIGATED TO PAY UPON ENROLLMENT-----\$550.00

**Tuition may be paid with any Major Credit Card**

Prior to signing this enrollment agreement, you must be given a catalog or brochure and a School Performance Fact Sheet, which you are encouraged to review prior to signing this agreement. These documents contain important policies and performance data for this institution. This institution is required to have you sign and date the information included in the School Performance Fact Sheet relating to the completion rates, placement rates, license examination passage rates, and salaries or wages, and the most recent three-year cohort default rate, prior to signing this agreement. This institution does not guarantee job placement.

I certify that I have received the Catalog, School Performance Fact Sheet, and information regarding Completion Rates, Placement Rates, License Examination Pass Rates, and Salary or Wage Information, and the most recent three-year cohort default rate, if applicable, and have signed, initialed, and dated the information provided in the School Performance Fact Sheet.

**X \_\_\_\_\_ Student Initials**

I understand this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution’s cancellation and refund policies and they have been clearly explained to me, prior to signing below.

I have read and understand

**SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Student

**SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Wagner Training Institute, Inc. Representative

# 2017 Registration Form

**a. TOTAL AMOUNT FOR ENTIRE PROGRAM \$1,780 + \$115 NATIONAL TEST + \$100 STATE = \$1,995**

**b. STUDENT MAY PAY ONE STEP AT A TIME – \$550 BASIC DIDACTIC 20 HOURS, \$550 ADVANCED DIDACTIC 20 HOURS, \$650 CLINICAL EXTERNSHIP, \$115 NATIONAL TEST, \$30 SITTING FEE, \$100 STATE APPLICATION PROCESS.**

NAME \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First M / F

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE\_( \_\_\_\_\_ ) \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Program Start date: \_\_\_\_\_ Program end date: \_\_\_\_\_

Period Covered by the enrollment agreement: Start date: \_\_\_\_\_ End date: \_\_\_\_\_

| <b>BASIC DIDACTIC– 20 Hours</b>  | <b>ADVANCED DIDACTIC– 20 Hours</b>   |
|--|--|
| <b>Class Location</b><br><br><b>Main Office</b><br>1040 Nevada Street<br>Suite 306<br>Redlands, CA 92374 | <b>Class Location</b><br><br><b>Main Office</b><br>1040 Nevada Street<br>Suite 306<br>Redlands, CA 92374 |
| <b>Class Dates</b>   | <b>Class Dates</b>   |

Amount submitted

\$ \_\_\_\_\_ Cash / Credit Card

\$ \_\_\_\_\_ Balance Due

Gave book, handouts, scrubs

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Scrub Size

\_\_\_\_\_ / \_\_\_\_\_

Amount submitted

\$ \_\_\_\_\_ Cash / Credit Card

\$ \_\_\_\_\_ Balance Due

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I certify that I have received the Catalog, School Performance Fact Sheet, and information regarding Completion Rates, Placement Rates, License Examination Pass Rates, and Salary or Wage Information, and have signed, initialed, and dated the information provided in the School Performance Fact Sheet. **X \_\_\_\_\_ Student Initials**

I understand this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities. I have read and understand the institution's cancellation and refund policies and they have been clearly explained to me, prior to signing below.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_  
 Student

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 Wagner Training Institute, Inc. Representative

## 2017 Schedule

**BASIC**  
**1<sup>st</sup> day Saturday - 8am- 5pm**  
**2<sup>nd</sup> day Sunday - 8am- 5pm**

**5 FULL DAYS SAT/SUN-8AM-5PM**

**3<sup>rd</sup> day Sunday- 8am -5pm**

**ADVANCED**  
**1<sup>st</sup> day Saturday -8am- 5pm**  
**2<sup>nd</sup> day Sunday - 8am- 5pm**

| Month     | Basic            | Advanced              |
|-----------|------------------|-----------------------|
| January   | Basic – 7, 8, 22 | Advanced – 14, 15, 22 |
| February  | Basic – 4, 5, 19 | Advanced – 11, 12, 19 |
| March     | Basic – 4, 5, 19 | Advanced – 11, 12, 19 |
| April     | Basic – 1, 2, 15 | Advanced – 8, 9, 15   |
| May       | Basic – 6, 7, 21 | Advanced – 13, 14, 21 |
| June      | Basic – 3, 4, 18 | Advanced 10, 11, 18   |
| July      | Basic – 8, 9, 23 | Advanced – 15, 16, 23 |
| August    | Basic – 5, 6, 20 | Advanced – 12, 13, 20 |
| September | Basic- 9, 10, 24 | Advanced – 16, 17, 24 |
| October   | Basic – 7, 8, 22 | Advanced – 14, 15, 22 |
| November  | Basic – 4, 5, 19 | Advanced – 11, 12, 19 |
| December  | Basic – 2, 3, 17 | Advanced – 9, 10, 17  |

*\*Easy payment plan available - pay each step prior to attending\**

Fee's for entire program \$1,780 + \$115+ \$100= \$1,995  
 \* Students may pay one step at a time \* \$550 Basic, \$550 Advanced, \$650 Externship, \$115 Test, \$30 sitting fee, \$100 State

1. Basic Phlebotomy 20 hours (weekend classes- Saturday's & Sunday's 8am-5pm) **\$550**
2. Advance Didactic 20 hours (weekend classes- Saturday's & Sunday's 8am-5pm) **\$550**
3. Clinical Externship 40 hours (week days-Monday-Friday) practice sessions available prior to clinical placement **\$650**
4. a. National Test- Apply on line: [www.nhanow.com](http://www.nhanow.com) submit payment **\$115 debit direct to the Testing Company**  
 b. Contact Wagner Training Institute, Inc. for a testing time 800 845-8353 **sitting fee \$30 for National Test**
5. Students need to call Wagner Training Institute, Inc. 800 845-8353 to complete State Application **\$100 debit direct to the State**