Wagner Training Institute 2026

1030 Nevada Street
Suite 201
Redlands, CA 92374
Phone: 800 845-8353 / 909 792-3000
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www.wti-edu.net
jwagner@wti-edu.net

Office hours 10am-2pm (Monday – Thursday) PLEASE CALL FOR A SAME DAY APPOINTMENT
Class hours 8am-5pm weekend classes
Classes will be held at 1030 Nevada St., Suite 201
Redlands, CA 92374

Welcome to Wagner Training Institute for your Phlebotomy Program. We have successfully provided professional training to the medical community for over 25 years. Our mission is to provide you with "*the best possible phlebotomy education with the least financial burden and to expose the students to an exciting career in laboratory services.*"

You will be instructed and encouraged by our patient, friendly and caring staff. All our staff are licensed and experienced Certified Phlebotomy Technicians (CPT1) with many years of experience in hospitals, laboratories, and clinics. Our Program Director is an experienced Physician Assistant.

Wagner Training Institute provides students with a complete 80-hour course of instruction in the field of phlebotomy: 20 hours of basic didactic education, 20 hours of advanced didactic education, and 40 hours of clinical externship, in accordance with California State requirements.

The course will include the following: Syllabus, power point handouts, scrubs, personal name badge and additional practice sessions. Students will be expected to perform live punctures on each other in a controlled setting. Live lectures include state of the art audio visual presentations of various topics including Arterial Blood Gases. Our qualified staff will build self-confidence, teach professionalism, and encourage students at his/her own pace.

Wagner Training Institute will provide a quick and convenient 40-hour clinical site. Students will be placed in hospitals, clinical laboratories, or clinics to complete the requirements. Demonstration of competency is required prior to clinical placement. This can be completed during scheduled lab sessions (stick practice). We offer 2 one-hour sessions each week.

Wagner Training Institute is a private institution which has been approved to operate by the California Bureau of Private Postsecondary Education and Department of Health-Laboratory Field Services. Approval to operate means the institution is compliant with the minimum standards contained in the California Private Postsecondary Education Act of 2009 (as amended) and Division 7.5 of Title 5 of the California Code of Regulations.

Judy Wagner, President, Owner, CEO

ENROLLMENT AGREEMENT
Registration Form / School Policy

1. **Prior to enrollment students need to be a minimum of 18 years and show proof of education. HS/GED or a completed college degree from a traditional college.**

   All foreign degrees must be **EVALUATED** and **TRANSLATED** by one of the following:
   http://www.naces.org/members.html (or) http://aice-eval.org/members/

2. **Included in the program: Syllabus, Power Point Handouts, Scrubs, Name Badge, and Extra practice Sessions.**
   - **Basic Didactic**
     - **Tuition** $275
     - **Registration - non-refundable** $175
     - **Equipment Fee** $150
     - **Student Tuition Recovery Fund STRF (non-refundable)** $0.00
   - **Advance Didactic** $600
   - **Clinical Externship** $700
   - **Test Fee** $134
   - **Sitting Fee** $50
   - **State Fee** $153.45

   - **Total Charges (the sum of institutional and non-institutional charges) $2,237.45**

3. **Class hours Basic 20 hours** 8am-5pm (weekends)
4. **Class hours Advanced 20 hours** 8am-5pm (weekends)
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. There is a $25 service charge for all returned checks.
8. **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 refunds within 45 days of a student's cancellation or withdrawal. The 45 days shall begin from the date when the enrollment agreement is signed. Date to Cancel: _____. All notices of cancellations or withdrawal must be presented in writing direct to Wagner Training Institute (attention: Judy Wagner owner) 1030 Nevada Street Suite 201, Redlands, CA 92374. If the student has received Federal student financial aid funds, the student is entitled to a refund of money not paid from Federal student financial aid program funds.
9. **Wagner Training Institute does not extend credits or lend money to an individual for the educational program.**
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 to any other government financial assistant at another institution until the loan is repaid.
11. **NONREFUNDABLE CHARGE**: Registration fee of $175.
12. The registration form is legally binding once signed by students & accepted by Wagner Training Institute, Inc. Students will need to re-enroll if they do not complete the 80 hours in 12 months.
13. Children, non-students, and pets are not allowed to attend any sessions including completing the State application. Students are required to be attentive and participate. Cell phones and electronic devices are to be turned off and recorded devices are not permitted. 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.

14. Wagner Training Institute reserves the right to modify program dates and locations for each course, without notification to meet operational needs. This does not apply to students who have already signed an enrollment agreement.
15. The health care profession operates under a strict drug-free policy. To perform their duties, health care workers must be focused and unimpaired safely and effectively. 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 their employer will only be permitted only if the student is a Medical Assistant with a "Letter of Experience".
16. 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.
17. Due to liability insurance coverage, once the student has completed the 80-hour course, you will NOT be eligible to return to the class for stick practice.
18. 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.**
19. 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 1747 N. Market Blvd. Ste 225 Sacramento, CA 95834, **www.bppe.ca.gov**, toll free number (888) 370-7589 or by fax (916) 263-1897.
20. Wagner Training Institute, Inc., does not offer a distance education program.
21. NOTICE CONCERNING THE TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT OUR INSTITUTION:
    The transferability of credits you earn at Wagner Training Institute 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 is 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 to determine if your certificate will transfer.
22. Wagner Training Institute will aid in explaining and clarifying the enrollment, disclosures, and statements to the students when they are unable to understand the terms and conditions of the enrollment agreement due to English not being their primary language.
23. **Student Recovery Tuition Fund (STRF)**

    "The State of California established the Student Tuition Recovery Fund (STRF) to relieve or mitigate economic loss suffered by a student in an educational program at a qualifying institution, who is or was a California resident while enrolled, or was enrolled in a residency program, if the student enrolled in the institution, prepaid tuition, and suffered an economic loss. Unless relieved of the obligation to do so, you must pay the state-imposed assessment for the STRF, or it must be paid on your behalf, if 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.

    You are not eligible for protection from the STRF, and you are not required to pay the STRF assessment, if you are not a California resident, or are not enrolled in a residency program."

    (b) In addition to the statement required under subdivision (a) of this section, a qualifying institution shall include the following statement in its school catalog:

    "It is important that you keep copies of your enrollment agreement, financial aid documents, receipts, or any other information that documents the amount paid to the school. Questions regarding the STRF may be directed to the Bureau for Private Postsecondary Education, 1747 North Market Blvd., Suite 225, Sacramento, CA 95833, (916) 574-8900 or (888) 370-7589.

    To be eligible for STRF, you must be a California resident or are enrolled in a residency program, prepaid tuition, paid or deemed to have paid the STRF assessment, and suffered an economic loss because of any of the following:

    1. The institution, the location of the institution, or an educational program offered by the institution was closed or discontinued, and you did not choose to participate in a teach-out plan approved by the Bureau or did not complete a chosen teach-out plan approved by the Bureau.

    2. You were enrolled at an institution or a location of the institution within the 120-day period before the closure of the institution or location of the institution or were enrolled in an educational program within the 120-day period before the program was discontinued.

3. You were enrolled at an institution or a location of the institution more than 120 days before the closure of the institution or location of the institution, in an educational program offered by the institution as to which the Bureau determined there was a significant decline in the quality or value of the program more than 120 days before closure.
4. The institution has been ordered to pay a refund by the Bureau but has failed to do so.
5. The institution has failed to pay or reimburse loan proceeds under a federal student loan program as required by law or has failed to pay or reimburse proceeds received by the institution more than tuition and other costs.
6. You have been awarded restitution, a refund, or other monetary award by an arbitrator or court, based on a violation of this chapter by an institution or representative of an institution, but have been unable to collect the award from the institution.
7. You sought legal counsel that resulted in the cancellation of one or more of your student loans and have an invoice for services rendered and evidence of the cancellation of the student loan or loan's.

To qualify for STRF reimbursement, the application must be received within four (4) years from the date of the action or event that made the student eligible for recovery from STRF.

A student whose loan is revived by a loan holder or debt collector after a period of noncollecting may, at any time, file a written application for recovery from STRF for the debt that would have otherwise been eligible for recovery. If it has been more than four (4) years since the action or event that made the student eligible, the student must have filed a written application for recovery within the original four (4) year period, unless the period has been extended by another act of law.

However, no claim can be paid to any student without a social security number or a taxpayer identification number. Note: Authority cited: Sections 94803, 94877 and 94923, Education Code. Reference: Section 94923, 94924 and 94925, Education Code.

THE TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE----------$2,237.45
THE ESTIMATED TOTAL CHARGES FOR THE ENTIRE EDUCATIONAL PROGRAM--------$2,237.45
THE TOTAL CHARGES THE STUDENT IS OBLIGATED TO PAY UPON ENROLLMENT-----$600

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 passage rates, salary or wage information, and the most recent three-year cohort default rate, if applicable, included in the School Performance Fact sheet, 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.

SIGNATURE:_____**Date:**_____
Student

SIGNATURE:_____**Date:**_____
Wagner Training Institute Representative

2026 Registration Form-Phlebotomy Program

a. **TOTAL FEE FOR THE 80-HOUR PROGRAM $1,950.00**
   Includes the following: scrubs, power point syllabus handouts, name badge, extra practice sessions.
b. **NATIONAL TEST $134 SITTING FEE $50 / STATE APPLICATION FEE $153.45**
c. **STUDENTS MAY PAY ONE STEP AT A TIME $600 BASIC 20 HOURS, $600 ADVANCED 20 HOURS, $700 CLINICAL 40 HOURS**

NAME_____ / _____ / _____
Last **First** **M / F**

ADDRESS _____

CITY_____ **STATE**_____ **ZIP CODE**_____

TELEPHONE (_____) _____ **DOB**_____ / _____ / _____

LAST 4 OF SOCIAL: _____ **EMAIL ADDRESS:** _____

Program Start date: _____ **Program end date:** _____

Period Covered by the enrollment agreement: Start date: _____ **End date:** _____

BASIC DIDACTIC– 20 Hours	**ADVANCED DIDACTIC– 20 Hours**
Class Location **Main Office** 1030 Nevada Street Suite 201 Redlands, CA 92374	**Class Location** **Main Office** 1030 Nevada Street Suite 201 Redlands, CA 92374
Class Dates	**Class Dates**

Pending _____

Amount submitted

$_____ Credit Card / Cash

$_____ Balance Due

Gave syllabus, handouts, scrubs
_____ / _____ / _____

Scrub Size
_____ / _____

Amount submitted

$_____ Credit Card / Cash

$_____ Balance Due

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 completion rates, placement rates, license examination passage rates, and salaries or wages, and the most recent three-year cohort default rate, if applicable, prior to signing this agreement."

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**_____ **Students 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.

STUDENT SIGNATURE_____ **DATE**_____

SIGNATURE_____ **DATE**_____
Wagner Training Institute, Inc. Representative

2026 Schedule
Weekends for 40 hours (Saturday/Sunday/Sunday)

Step #1 BASIC 20 hours	(5 full days 8am-5pm)	Step #2 ADVANCED 20 hours
January		
Basic 10, 11		Advanced 17, 18, 25
February		
Basic 7, 8		Advanced 14, 15, 22
March		
Basic 14, 15		Advanced 21, 22, 29
April		
Basic 11, 12		Advanced 18, 19, 26
May		
Basic 2, 3		Advanced 9, 10, 17
June		
Basic 6, 7		Advanced 13, 14, 28
July		
Basic 11, 12		Advanced 18, 19, 26
August		
Basic 15, 16		Advanced 22, 23, 30
September		
Basic 12, 13		Advanced 19, 20, 27
October		
Basic 10, 11		Advanced 17, 18, 25
November		
Basic 7, 8		Advanced 14, 15, 22
December		
Basic 5, 6		Advanced 12, 13, 20

Option #1 pay in full $1,950.00 (80 hours) includes sitting fee for the test
Option #2 pay step by step, prior to attending

1. Basic 20 hours **$600**
2. Advanced Didactic 20 hours **$600**
3. Clinical Externship 40 hours **$700** Pease note* Clinical check-off and paperwork is conveniently set up during stick practice sessions

Sitting fee for National test **$50** may be paid the day of the test

STEPS 4 & 5 STUDENT WILL PAY DIRECT TO THE REQUESTING AGENCIES

4. National Test- www.nhanow.com Create a username / password, select our school under "organization" pay NHA direct **$134**
5. State Application-Create account and pay the State online **$153.45** WTI will assist with this process following the National Test

Total Charges (the sum of institutional and noninstitutional charges) $2,237.45