Community Regional Medical Center Advanced Cardiovascular Sonography

ENROLLMENT AGREEMENT

Community Regional Medical Center • 2823 Fresno Street, CA 93721

Phone: (559) 459-2731	• Fax: (559) 459-2935	•	<u> </u>
PLEASE PRINT OR TYPE Applicant Legal Name		□New Student	☐ Re-Entry Student
(First)	(Middle)	(Last) Driver's License / ID No	
Home Telephone: ()	Work: ()	Cell: (_	
Address			
E-Mail		Fax No	
A. EDUCATIONAL SERVICE Program: Advanced Cardiovascular S	Sonography		
Total Clock Hours: Lecture = 240 , Lab	9	ximate No. of Weeks 73	
Enrollment Agreement Period - Start D	ate: 01/8/2024 / Scheduled Co	ompletion Date: 06/26/20	25
Enrollment Agreement Period Program	- Start Date: 01/8/2024 / Prog	ram Scheduled Completio	on Date: 06/26/2025
Lecture Hours: Hybrid (Synchronous	/Asynchronous) / Clinical Inte	ernship Hours: 8:00am to	5:00pm
On the following days of the week: X	Mon X Tues X Wed X Thur	rs X Fri 🗖 Sat 🗖 Sun	
B. ITEMIZATION & TOTAL TUI	TION FEES		
Application Fee Books Materials Student Tuition Recovery Fee (STRF) Tuition TOTAL (Tuition) TOTAL CHARGES FOR THE CU ESTIMATED TOTAL CHARGES THE TOTAL CHARGES THE ST * YOU ARE RESPONSIBLE FOR T FOR REPAYING THE LOAN AM Additional Fees, as applicable: Offic These fees do not include travel or lodg STUDENT AGREES TO PAY AD	\$ 50.00 Prices fluctude \$ 0.00 Non-refundate \$ 8,000.00 Prorated upo \$ 9,137.61 FOR THE ENTIRE EDUCATE THIS AMOUNT. IF YOU GET THIS AMOUNT. IF YOU GET TOUNT PLUS ANY INTERES THE INTERES THE SOBLIGATED TO THIS AMOUNT. IF YOU GET THE SOBLIGATED TO THE S	the depending on recent book edited epending on stores from white let a \$0.00 per one thousand doll in withdrawl. Refer to refund pole a \$1.00 per one thousand doll in withdrawl. Refer to refund pole a \$1.00 per one thousand doll in withdrawl. Refer to refund pole a \$1.00 per one thousand pole a \$1.00 per one thousand pole a \$1.00 per one to be stored to	sars (\$1,000) of institutional charges icy provision within this Agreement. \$\frac{3,000.00*}{\sumeq}\$ \$\frac{9,137.61}{\sument}\$ LMENT \$\frac{3,000.00}{\sumeq}\$ YOU ARE RESPONSIBLE TOF ANY REFUND. \$\times \frac{200}{\sumeq}\$ dent residence. OWING:
 ☐ Beginning of the program ☐ Beginning of the 5th month of the program 	\$3,000.00	Beginning of the 10 th month	of the program \$3,137.61
BALAN	CE DUE \$ Payment	Agreement:	
THE TERMS AND CONDITIONS OF THIS A AGREEMENT. I, THE UNDERSIGNED PURCH THE TERMS AND CONDITIONS CONTAINED OF THIS AGREEMENT, A COPY OF THE ACKNOWLEDGE THAT NO VERBAL STATEM THIS ENROLLMENT AGREEMENT IS A LEGATHE SCHOOL. I understand that this is a legally bi stood, and agreed to my rights and policies have been clearly explained	ASER OF THE PROGRAM OF THE HEREIN AND WITH MY SIGNA SCHOOL CATALOG AND SOMENTS HAVE BEEN MADE CONTALLY BINDING INSTRUMENT WITH MY SIGNA CONTACT. My signated responsibilities, and the service of the contract.	RAINING, HAVE READ, U TURE I CERTIFY HAVINC CHOOL PERFORMANCE FRARY TO WHAT IS CONT WHEN SIGNED BY THE S ture below certifies	NDERSTAND AND AGREE TO GRECEIVED AN EXACT COPY FACT SHEET. I FURTHER FAINED IN THIS AGREEMENT. TUDENT AND ACCEPTED BY that I have read, under-
Signature of Student		Date	
Signature and Title of School Official Accepti	ng Enrollment	Date	

C. REFUND POLICY

RESIDENTIAL PROGRAMS

STUDENT'S RIGHT TO CANCEL

1. You have the right to cancel your agreement for a program of instruction, without any penalty or obligations, through attendance at the first class session or the seventh calendar day after enrollment, whichever is later. After the end of the cancellation period, you also have the right to stop school at any time; and you have the right to receive a pro rata refund if you have completed 60 percent or less of the scheduled days in the current payment period in your program through the last day of attendance.

Cancellation of this agreement can occur up to: February 9, 2024.

- 2. Cancellation may occur when the student provides a written notice of cancellation at the following address: Community Regional Medical Center, 2823 Fresno Street, Fresno, CA 93721. This can be done by mail or by hand delivery.
- 3. The written notice of cancellation, if sent by mail, is effective when deposited in the mail properly addressed with proper postage.
- 4. The written notice of cancellation need not take any particular form and, however expressed, it is effective if it shows that the student no longer wishes to be bound by the Enrollment Agreement.
- 5. If the student cancels within the Right to Cancel period, the school must refund 100% of the amount paid for institutional charges, less a reasonable deposit or application fee not to exceed \$250.00. Equipment, textbooks, and supplies purchased for the program will be provided to students after the Right to Cancel period.

WITHDRAWAL FROM THE PROGRAM

You may withdraw from the school at any time after the cancellation period (described above) and receive a pro rata refund if you have completed 60 percent or less of the scheduled days in the current payment period in your program through the last day of attendance. The refund will be less a registration or administration fee not to exceed \$250.00, and less any deduction for equipment not returned in good condition, within 45 days of withdrawal. If the student has completed more than 60% of the period of attendance for which the student was charged, the tuition is considered earned and the student will receive no refund.

For the purpose of determining a refund under this section, a student shall be deemed to have withdrawn from a program of instruction when any of the following occurs:

- The student notifies the institution of the student's withdrawal or as of the date of the student's withdrawal, whichever is later.
- The institution terminates the student's enrollment for failure to maintain satisfactory progress; failure to abide by the rules and regulations of the institution; absences in excess of maximum set forth by the institution; and/or failure to meet financial obligations to the School
- The student has failed to attend class for three (3) consecutive weeks (online or onsite).
- The student fails to return from a leave of absence.

For the purpose of determining the amount of the refund, the date of the student's withdrawal shall be deemed the last date of recorded attendance. The amount owed equals the daily charge for the program (total institutional charge, minus non-refundable fees, divided by the number of days in the program), multiplied by the number of days scheduled to attend, prior to withdrawal. For the purpose of determining when the refund must be paid, the student shall be deemed to have withdrawn at the end of three (3) consecutive weeks. If the student has completed more than 60% of the period of attendance for which the student was charged, the tuition is considered earned and the student will receive no refund.

If any portion of the tuition was paid from the proceeds of a loan or third party, the refund shall be sent to the lender, third party or, if appropriate, to the state or federal agency that guaranteed or reinsured the loan. Any amount of the refund in excess of the unpaid balance of the loan shall be first used to repay any student financial aid programs from which the student received benefits, in proportion to the amount of the benefits received, and any remaining amount shall be paid to the student. 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.

DISTANCE EDUCATION PROGRAMS

STUDENT'S RIGHT TO CANCEL

Our Advanced Cardiovascular Sonography program offers our program mainly by distance education. However, there are 3 weeks of required synchonous learning on campus within the 18 month program. Specifically speaking about the distance learning component of this program, the following would apply:

The Institution shall transmit the first lesson and any materials to any student within seven days after the institution accepts the student for admission.

The student has the right to cancel the agreement and receive a full refund before the first lesson and materials are received. Cancellation is effective on the date the written notice of cancellation is sent to: Community Regional Medical Center, 2823 Fresno Street, Fresno, CA 93721. If the institution sent the first lesson and materials before an effective cancellation notice was received, the institution shall make a refund within 45 days after the student's return of the materials.

Cancellation must occur prior to the receipt of	of the first lessor	and materials,	which will o	occur within sev	ven days after the
institution accepts the student for admission.					
_	Initial				

This Institution shall transmit all of the lessons and other materials to the student if the student (a) has fully paid for the educational program; and (b) after having received the first lesson and initial materials, requests in writing that all of the material be sent. If the Institution transmits the balance of the material as the student requests, the Institution shall remain obligated to provide the other educational services it agreed to provide, such as responses to student inquiries, student and faculty interaction, and evaluation and comment on lessons submitted by the student, but shall not be obligated to pay any refund after all of the lessons are material are transmitted.

WITHDRAWAL FROM THE PROGRAM

You may withdraw from the school at any time and receive a pro rata refund if you have completed 60 percent or less of the scheduled days in the current payment period in your program through the last day of attendance. The refund will be less a registration or administration fee not to exceed \$250.00, and less any deduction for books and materials not returned in new condition as stated as refundable on the enrollment agreement. A refund will be made within 45 days of withdrawal.

BE SURE TO READ ALL PAGES OF THIS AGREEMENT.	IT IS PART OF YOUR CONTRACT WITH THE SCI	HOOL.
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For the purpose of determining a refund under this section, a student shall be deemed to have withdrawn from a program of instruction when any of the following occurs:

- The student notifies the institution of the student's withdrawal or as of the date of the student's withdrawal, whichever is later.
- The institution terminates the student's enrollment for failure to maintain satisfactory progress; failure to abide by the rules and regulations of the institution; and/or failure to meet financial obligations to the School.

For the purpose of determining the amount of the refund, the date of the student's withdrawal shall be deemed the last date of recorded attendance. The amount owed equals the daily charge for the program (total institutional charge, minus non-refundable fees, divided by the number of days in the program), multiplied by the number of days scheduled to attend, prior to withdrawal. For distance education students scheduled days is based on a five day week, which does not include Saturday or Sunday, or any defined holiday as enumerated in Section 6700 of the California Government Code (specific holidays published in the catalog).

If any portion of the tuition was paid from the proceeds of a loan or third party, the refund shall be sent to the lender, third party or, if appropriate, to the state or federal agency that guaranteed or reinsured the loan. Any amount of the refund in excess of the unpaid balance of the loan shall be first used to repay any student financial aid programs from which the student received benefits, in proportion to the amount of the benefits received, and any remaining amount shall be paid to the student. 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.

UN	IDERSTANDINGS	INITIAL
1.	<u>Catalog</u> : Information about Community Regional Medical Center – Advanced Cardiac Sonography Program (CRMC-ACSP) is published in a school catalog that contains a description of certain policies, procedures, and other information about the school. CRMC-ACSP reserves the right to change any provision of the catalog at any time. Notice of changes	
	will be communicated in a revised catalog, an addendum or supplement to the catalog, or other written format. Students	
	are expected to read and be familiar with the information contained in the school catalog, in any revisions, supplements and addenda to the catalog, and with all school policies. By enrolling in the CRMC-ACSP, the Student agrees to abide by the terms stated in the catalog and all school policies.	
2.	<u>Location:</u> All residential instruction occurs at the address checked on page 1 of this agreement. Distance education coursework is completed at a location determined by the student.	
3.	I understand that I will be awarded a certificate when I have completed all of the program requirements. A graduate must have passed each course and have satisfied all financial obligations.	
4.	NOTICE CONCERNING TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT OUR	
	INSTITUTION: The transferability of credits you earn at Community Regional Medical Center-Advanced Cardiac Sonography Program (CRMC-ACSP) is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the certificate you earn in the Advanced Cardiac Sonography Program is also at the complete discretion	
	of the institution to which you may seek to transfer. If the certificate 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 of 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 CRMC-ACSP to determine if your certificate will transfer.	
5.	<u>Career Services</u> : Placement assistance is not provided as the Advanced Cardiac Sonography Program is designed for working and credentialed cardiac sonographers. It is understood that the School does not and cannot promise or guarantee	
	neither employment nor level of income or wage rate to any Student or Graduate.	
6.	Questions: 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 for Private Postsecondary Education at:	
	 a. Address: 1747 N. Market Blvd. – Suite 225, Sacramento, CA 95834 -or- b. Address: P.O. Box 980818, West Sacramento, CA 95798-1897 c. Web: www.bppe.ca.gov 	
	d. Telephone: (888) 370-7589 -or- (916) 431-6959 e. Fax: (916) 263-1897	
7.	<u>Complaints</u> : A student or any member of the public may file a complaint about this institution with 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.	
8.	Financing: The Student understands that if a separate party is financing his/her education, that the Student, and the Student alone, is directly responsible for all payments and monies owed to the school listed on this agreement.	
	<u>Distance Education Equipment Requirements:</u> Computer with Windows 10 operating system (or higher) or equivalent Apple computer, and internet access (with speed adequate for ZOOM interaction).	
10.	Loan: 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. If a student is eligible for a loan guaranteed by	
	the federal or state government and the student defaults on the loan, both of the following may occur: a. The federal or state government or a loan guarantee agency may take action against the student, including applying any income tax refund to which the person is entitled to reduce the balance owed on the loan. b. The student may not be eligible for any other federal student financial aid at another institution or other	
11.	government assistance until the loan is repaid. Notice of Indebtedness: You may assert against the holder of a promissory note you signed in order to finance the cost of the educational program all of the claims and defenses that you could assert against this institution, up to the amount	
12	you have already paid under the promissory note. Student Tuition Recovery Fund: The State of California established the Student Tuition Recovery Fund (STRF) to	
12.	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 obiligation 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 requited to pay the STRF assessment, if you are not a California resident, or are not enrolled in a residency program.	
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Prio	or to signing this enrollment agreement, you must be given a catalog or brochure and a School Performance Fact Sheet,	

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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 passage rates, and 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.				