# ENROLLMENT AGREEMENT

Ready Set Scrubs CNA LLC
5610 Kitsap Way Ste 375
Bremerton, WA 98312
(360) 362-4177

This Enrollment Agreement is between the above-named school and:

**Student Name:** _____

**Telephone:** _____

**Physical Address:** _____

**City:** _____ **State:** _____ **Zip:** _____

## PROGRAM INFORMATION

**Start Date:** _____

**Completion Date:** _____

**Program Title:** Nursing Assistant Certified (NAC) Training Program

The program consists of 112 scheduled instruction hours completed in under four weeks.

- 36 hours of Theory/Classroom
- 36 hours of Skills Lab
- 40 hour of Supervised Clinical Training

## COST

| Item | Amount |
|---|---|
| Enrollment Deposit (applied toward tuition) | $250 |
| Tuition Balance | $950 |
| Books | Included |
| Supplies and Materials | Included |
| American Heart Association BLS Certification | Included |
| Certification Testing* | Included |
| Background Check | Included |
| **Total Program Cost** | **$1200** |

**Certification testing is included when testing with the student's scheduled Ready Set Scrubs CNA cohort.*

# METHOD OF PAYMENT

I agree that the payment of program costs will be satisfied by (check all that apply):

☐ Cash ☐ Credit Card ☐ Payment Plan ☐ Scholarship

# ADMISSION & CLINICAL REQUIREMENTS

Students must meet all program admission and clinical participation requirements as outlined in the Ready Set Scrubs CNA Student Handbook and school policies.

Clinical participation may require:

- Successful completion of criminal background screening acceptable to assigned clinical facilities
- Documentation of a negative 2-step TB (tuberculosis) screening/testing within the past 12 months
- Documentation of immunizations and health records if required by assigned clinical facilities
- Drug screening if required by clinical sites
- Additional clinical site-specific requirements

Failure to meet clinical participation requirements may prevent completion of the program.

# AGREEMENT NOTICE

This agreement will be binding only when it has been fully completed, signed, and dated by the student and an authorized representative of the school prior to the time instruction begins.

# CHANGES TO AGREEMENT NOTICE

Any changes in the agreement will not be binding on either the student or the school unless such changes are acknowledged in writing by an authorized representative of the school and by the student, or the student's parent or guardian if he/she is a minor.

# CANCELLATION AND REFUND POLICY

1. If an applicant is not accepted by the school, all monies paid shall be refunded.
2. If the school cancels a class or program start, all monies paid shall be refunded.
3. If the applicant cancels within five business days (excluding Sundays and holidays) after signing the Enrollment Agreement and before training begins, all monies paid shall be refunded.
4. After the five-business-day cancellation period and prior to the start of training, the school may retain a registration fee not to exceed ten percent (10%) of tuition or one hundred dollars ($100), whichever is less. After instruction begins, the school may retain tuition according to the following schedule:

| **If the student completes this amount of training** | **School may keep this percentage of tuition** |
|---|---|
| One week or up to 10%, whichever is less | 10% |
| More than one week (or 10%), whichever is less, but less than 25% | 25% |
| 25% through 50% | 50% |
| More than 50% | 100% |

5. When calculating refunds, the official date of a student's termination is the last day of recorded attendance:
    a. When the school receives notice of the student's intention to discontinue the training program; **or**

    b. When the student is terminated for a violation of a published school policy which provides for termination; **or**

    c. When a student, without notice, fails to attend classes for thirty calendar days.

6. All refunds must be paid within thirty (30) calendar days of the student's official termination date.

# NOTICE TO THE BUYER

Do not sign this contract before you READ IT or if it contains any blank spaces. This is a legal document.

All pages of the contract are binding. READ both sides of all pages before signing. You are entitled to an exact copy of the contract, school catalog, and any papers that you sign and are required to sign a statement acknowledging receipt of those.

If you have not started training, you may cancel this contract by providing written notice of cancellation to the school at its address shown on the contract. The notice must be postmarked no later than midnight of the fifth business day (excluding Saturdays and Sundays) following the signing of this contract or the written statement may be personally or otherwise delivered to the school. If there is a dispute over timely notice, the burden to prove service rests on the student.

It is an unfair business practice for the school to sell, discount, or otherwise transfer this contract without the informed written consent by handwritten signature of the student or his/her financial sponsors and a written statement notifying all parties that the cancellation and refund policy still applies.

# CANCELLATION OF CONTRACT

If you have not started training, you may cancel this contract by submitting written notice to the school at the address listed above.

The notice must be postmarked no later than midnight of the fifth business day (excluding Sundays and holidays) following the signing of this contract. Written notice may also be personally delivered to the school within that time period.

In the event of dispute over timely notice, the burden to prove service rests on the applicant.

# UNFAIR BUSINESS PRACTICES

It is an unfair business practice for the school to sell, discount, or otherwise transfer this contract or promissory note without the signed written consent of the student and a written statement notifying all parties that the cancellation and refund policy continues to apply.

# CERTIFICATION

I certify that I have read and understand the cancellation and refund policy and the complaint procedure. I acknowledge that I have received a copy of the school catalog and class schedule and have been provided access to the Washington State Board of Nursing common curriculum materials for students. I acknowledge that I am entitled to an exact copy of this Enrollment Agreement, the school catalog, and any other papers that I sign.

Student complaints about this nursing assistant training program can be filed with the nursing care quality assurance commission.

https://nursing.wa.gov/discipline-and-complaints/file-complaint

# STUDENT

**Printed Name:** _____

**Signature:** _____

**Date:** _____

# AUTHORIZED SCHOOL REPRESENTATIVE

As the authorized representative of the school, I hereby agree to the conditions set forth herein.

**Printed Name:** _____

**Signature:** _____

**Date:** _____

# ATTACHMENT A

## NOTICE OF FINANCIAL OBLIGATION

Washington law requires the following information to be supplied to each student enrolling in a private vocational school licensed under Chapter 28C.10 RCW. One copy of this notice bearing original signatures must be attached by the school as addenda to that individual's enrollment agreement, as well as a copy provided to the enrollee by the school.

## ACKNOWLEDGMENT BY ENROLLEE

1. I understand and accept that any contract for training I enter into with the above named school contains legally binding obligations and responsibilities.
2. I understand and accept that repayment obligations will be placed upon me by any loans or other financing arrangements I enter into as a means to pay for my training.
3. I understand that any enrollment contract I enter into will not be binding or take effect for at least five days, excluding Sundays and holidays, following the last date such a contract is signed by the school and me, provided that I have not entered classes.

Name: _____

Signature: _____

Dated this: _____ day of _____**, 20**

**ACKNOWLEDGMENT BY SCHOOL**

Prior to being enrolled in this school, the applicant whose name and signature appears above has been made aware of the legal obligations he/she takes on by entering into a contract for training. Those discussions included cautions by the school about acquiring an excessive debt burden that might become difficult to repay given employment opportunities and average starting salaries in his/her chosen occupation.

Name: _____

Title: _____

Signature: _____

Dated this: _____ day of _____**, 20**

# ATTACHMENT B

**HOW TO FILE A COMPLAINT**

Washington law requires private vocational schools to inform students how to file a complaint. By signing this form you acknowledge this process has been explained to you. Below are the next steps the school must take in discussing this policy with you, along with information about the complaint process.

**DISCUSSION ABOUT COMPLAINT POLICY REQUIRED**

First, a school representative must discuss the school's complaint policy with you. Following this discussion, you will be provided with this attachment to sign. After you sign this form, the school will give you a copy for your personal records. The school will also keep a copy on file.

**ACKNOWLEDGMENT OF COMPLAINT PROCESS BY STUDENT**

1. The school has described the grievance and/or complaint policy to me.
2. I understand that the policy can also be found in the school catalog.

3. I know I should first try to resolve a complaint or concern with my instructor or school administrator.
4. I understand nothing prevents me from contacting the Workforce Board at 360-709-4600 at any time with a concern or complaint, and complaint forms are: http://wtb.wa.gov/PCS_Complaints.asp.
5. I understand that I have one year to file a complaint from my last date of attendance.
6. I further understand that in the event of a school closure, I have 60 days to file a complaint.
7. I also understand that complaints are public records.
8. Finally, I acknowledge that details about the complaint process, my rights, and any restrictions on the time I have to file a complaint can be found at http://wtb.wa.gov/PCS_Complaints.asp.

Name: _____

Signature: _____

Date: _____**, 20**

**ACKNOWLEDGMENT BY SCHOOL**

Prior to being enrolled in this school, the applicant, whose name and signature appear above, has been made aware of the school's complaint policy.

Name: _____

Signature: _____

Title: _____

Date: _____**, 20**