



2459 Roosevelt Highway, Suite C-9
College Park, GA 30337

Enrollment Agreement

Student Information

Student Name: _____ Student ID#: _____
 Street Address: _____ City: _____ State: _____ Zip: _____
 Home/Cell Phone: _____ Work Phone: _____
 Email: _____ Social Security Number: _____
 Emergency Contact Name: _____ Phone: _____
 Relationship to Student: _____

Are you at least 18 years of age? Yes No Are you a U.S. Citizen? Yes No

Attestation of High School Graduation or GED*: I understand that a high school diploma or its equivalency is required for admission to Clinical Skills Training Center, Inc. I hereby certify that I have (select one of the following): A high school diploma A GED

High School Name: _____ City/State: _____ Graduation Date: _____
 GED Testing Site: _____ City/State: _____ Graduation Date: _____

If for any reason, this attestation of high school graduation, GED completion or awarded degree is found to be false or untrue, I understand that I will not have met admission requirements for Clinical Skills Training Center, Inc., and I will not be considered a regular student and thus subject to immediate dismissal. By signing below, I attest that that information provided above is true and correct to the best of my knowledge and authorize the to request transcripts or other documentation to confirm my attestation.

Program Information

Program Name: Phlebotomy/EKG Program Level: _____

Program Objective: This course is designed to provide the students with an overall understanding of phlebotomy and EKG technician skills.

Program Start Date: _____ Scheduled End Date: _____

Full/Part Time: _____ Morning/Evening: _____

Days Class Meets (circle) M T W Th F Sa Su

Schedule Notes:

Number of Weeks: _____ Total Clock/Credit Hours: _____

Tuition & Fee Information

Application Fee: _____ Tuition: _____ Fees: _____ Other Costs: _____

Total Costs: _____

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

_____ Cash _____ Credit Card _____ Check _____ Other

If other source, please list: _____

The tuition above is for the entire program and includes necessary materials and equipment and supplies; there is no separate charge for books and supplies. The application fee is a one-time fee paid at the time of application.

By signing below, I certify that I have received a complete copy of this agreement, and that I have, understand and agree to comply with all of its terms. I also acknowledge that I have received and had an ample opportunity to review a copy of the school's catalog and I agree to comply with all school disclosures, policies, and rules contained therein. I also understand and agree that this agreement supersedes all prior or contemporaneous verbal or written statements and agreements made by the school or any employee of the school, and that no binding promises, representations or statements have been made to me by the school or any employee of the school regarding any aspect of the education and training I will receive from the school or the prospects for employment or salary upon graduation that are not set forth in writing in this agreement. I further understand and agree that this agreement may not be modified without the written agreement of the school. I hereby certify that all information I provided in my application for admission to the school is complete, accurate and up to date. Once this signed agreement is accepted by the school, I understand that a legally-binding contract is created. My signature indicates that I agree to all of the above terms.

Student Signature: _____

Date: _____

Printed Name: _____

School Representative: _____

Date: _____