**STUDENT ENROLLMENT AGREEMENT 2023 (PLEASE PRINT)**

**Student Information - Please Clearly Print Date:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ The following information is used for billing and identification only and will not be sold or used for any solicitation. Your information is secured by HIPAA privacy policies.**

##### STUDENT CONSENTS

I give permission to publish my name, phone number and email address on the class roster? YES  NO 

**Email address**: **Your information will not be sold or used by any other source, or used for solicitation. Your email may be used to contact you concerning school or classroom correspondence only. (PLEASE PRINT)**

##### How did you hear about Creative Healthcare Concepts?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| * Online | * Friend | * Other |  | | |
| **Student Name**: |  |  |  |  |  |
| First  **Address:** |  | Last |  | MI |  |
| Street Apt # |  |  | City | State Zip |  |

**Date of Birth**: / /

### Contact Info:

**Home** (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell** (\_\_\_\_) \_\_\_\_\_\_ **Wk**(\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Name and phone number of a person in case of an emergency**:

###### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Optional – The following questions could be helpful in case of an emergency**

**Are there any health related illnesses we should be made aware of?**  **No**  **Yes If yes, what?**

**Programs/Courses Offered:**

### Creative Healthcare - Inpatient Boot Camp

##### 8 Week Course Tuition = $950.00 (Weekly Payments $100.00)

**(Tuition does not include fees certification test)**

### PRE-PAYMENT REGISTRATION

#### A **non-refundable $50 Registration Fee** is required at the time of signing the agreement/contract for all courses provided. This payment will be credited towards your tuition fee.

**Non-refundable Registration Fee** is due for the course(s) the student is registering for. Remaining balance of tuition payment is due in full to Creative Healthcare Concepts on the first day of class, Or with our “pay as you go option” no later than the 9th week of the course. (**9 equal payments**)

For information concerning refunds &\*\*\* Payment plans, see the Refund & Payment policies in this Enrollment Agreement. \*\*\*Call Creative Healthcare Concepts for further details.

***You will receive an email of confirmation from Creative Healthcare Concepts with date, time and balance due for current class enrollment.***

### REFUND AND PAYMENT POLICIES

By signing below, the student agrees to pay Creative Healthcare Concepts, hereafter referred to as CHC, the total stated tuition and fees no later than the 8th week of the course. CHC agrees to provide the occupational training in accordance with industry standards of practice. Payment of all monies due shall be a condition of continuing enrollment.

Payments are due each week. After one week of non-payment CHC. has the right to terminate the student from the 8-week coding course. If student does not attend the classroom on a scheduled date by signing this agreement they are **still responsible to pay** for the missed course and in return will receive a PowerPoint along with any handouts distributed for that session.

Upon satisfactory completion of all academic and skill requirements and when all financial obligations to Chronicles have been met (prior to the course end date), CHC will award the certificate of completion to the student, as well as 24 (Twenty-four) ICD-10 CM/PCS AHIMA CEU’s.

The student and CHC understand that this Enrollment Agreement, WHICH INCLUDES THE REFUND POLICY, may not be amended except in writing and signed by both parties.

Postponement of starting date, whether at the request of CHC or the student, requires a written agreement signed by the student and CHC.

The agreement must set forth:

1. Whether the postponement is for the convenience of CHC or student, and;
2. A deadline for the new start date, beyond which the start date will not be postponed.

If the course is not commenced, or the student fails to attend by the new start date set forth in the agreement, the student will be entitled to an appropriate refund of any prepaid portion of the tuition less the **$50.00 non-refundable Registration fee** within 30 days of the notice.

Students who elect to withdraw, from the course prior to the commencement of the 8 Week course start date, after signing this Student Enrollment Agreement are not entitled to a full refund of any tuition paid above (as this is a pay as you go program).The **$50.00 is a non- refundable Registration fee.**

CHC will retain the **$50.00 non-refundable Registration fee** for any students who decides to cancel or withdrawal at any point during the commencement of the 8 week course, The Refund Table below outlines the paid in full refund vs. the pay as you go refund which is based on the percentage of contract hours and is also based on the last date of recorded attendance.

\*\*\***Non-Refundable deposit is required for enrollment**\*\*\*

### Refund Table: Student is entitled to upon withdraw/termination Refund

All refunds will be made by mail via check within 30 days from the date of termination notice was received in writing. The official date of termination or withdrawal of a student shall be determined in the following manner:

* + The date on which CHC received written notice of the student’s intention to discontinue the training program; or
  + The date on which the student violates published school policy, which provides for termination.

Paid In Full Option:

Cancellation or withdrawal within first 2 weeks week of program (1st – 2nd class) CHC will retain the Initial **$50.00 non-refundable Registration fee**; Weekly course $100.00 fee and

**$150.00 cancellation charge** will apply;

Cancellation or withdrawal after the 3rd week of program (3rd class) 50% of the total tuition fee is refundable (if paid in full, cancellation charge is not applicable). Initial **$50.00 Registration Fee is non-refundable**.

Pay As You Go Option:

Since this is paid on a weekly basis as you come to class, refunds will only be granted if any payment were made in advance of to the commencement of that week’s class. CHC will retain the Initial **$50.00 non-refundable Registration fee and $150.00 cancellation charge** will apply.

* Enrollment in programs not listed on the original contract are included and subject to all policies and terms of the original contract, i.e.; student terms/policies/payment policies and refunds.

### Copyright

Handouts, and visual aids are the sole property of CHC. Copying, distributing or duplicating any of this information is prohibited without the written consent of CHC. CHC strictly enforces this policy and violators will be prosecuted.

### Grievances

###### Complaints will be resolved by the student and CHC.

**I have received a copy of this enrollment agreement and fully understand the terms of this student contract by signing below.**

**————————————————————————————————————— ————————————**

**Student Name in Print Date**

**————————————————————————————————————— ————————————**

**Student Signature Date**