

**VIRGINIA TECHNICAL INSTITUTE**  
**201 Ogden Road**  
**Altavista, Virginia 24517**  
**OFFICE: (434) 369-8200**  
**FAX: (434) 369-8400**  
[www.govti.org](http://www.govti.org)

**Enrollment Agreement**

STUDENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE#: \_\_\_\_\_ CELL#: \_\_\_\_\_ WORK#: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ GENDER: Male \_\_\_\_\_ Female \_\_\_\_\_

PROOF OF AGE: Drivers License \_\_\_\_\_ State ID \_\_\_\_\_ Birth Certificate \_\_\_\_\_

RACE: Alaskan, Native American Indian \_\_\_\_\_ Asian or Pacific Islander \_\_\_\_\_

African American/Black (not of Hispanic origin) \_\_\_\_\_ Hispanic \_\_\_\_\_

Caucasian (White) \_\_\_\_\_ Other \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

**PROGRAM INFORMATION**

DATE OF ADMISSION: \_\_\_\_\_ PROGRAM/COURSE: CORE & \_\_\_\_\_

PROGRAM START DATE: 08/24/20 \_\_\_\_\_ ANTICIPATED END DATE: 11/24/20 \_\_\_\_\_

DAYS/EVENINGS CLASS MEETS: (circle) M Tu W Th Fr

TIME OF DAY/EVENING CLASS BEGINS: 5:00pm TIME OF DAY/EVENING CLASS ENDS: 9:00pm

NUMBER OF WEEKS: 15

**Tuition:**

The total cost of the     CORE &     program:

Tuition:	\$ <u>1400.00</u>
Non-Refundable registration Fee	\$ <u>          </u>
Books/supplies	\$ <u>          </u>
Lab Fees	\$ <u>          </u>
Total Cost	\$ <u>          </u>

**CANCELLATION REFUND POLICY:**

The minimum refund policy shall be as follows:

- a. A student who enters the school but withdraws or is terminated during the first quartile (25%) of the program shall be entitled to a minimum refund amounting to 75% of the cost of the program.
- b. A student who withdraws or is terminated during the second quartile (more than 25% but less than 50%) of the program shall be entitled to a minimum refund amounting to 50% of the cost of the program.
- c. A student who withdraws or is terminated during the third quartile (more than 50% but less than 75%) of the program shall be entitled to a minimum refund amounting to 25% of the cost of the program.
- d. A student who withdraws after completing more than three quartiles (75%) of the program shall not be entitled to a refund.

All refund requests will be disbursed within 45 days of the determination of the withdrawal date.

### **Notice to Buyer:**

1. Do not sign this agreement before you have read it or if it contains any blank spaces.
2. This agreement is a legally binding instrument. Both sides of the contract is binding instrument only when the agreement is accepted, signed, and dated by the authorized official of the school or the admissions officer at the school's principal place of business. Read both sides before signing.
3. You are entitled to an exact copy of this agreement and any disclosure pages you sign.
4. This agreement and the school catalog constitute the entire agreement between the student and the school.
5. The school does not guarantee job placement to graduates upon program completion.
6. The school reserves the right to reschedule the program start date with the number of students schedule is too small.
7. The school reserves the right to terminate a students' training for unsatisfactory progress, nonpayment of tuition or failure to abide established standards of conduct.
8. The school does not guarantee the transferability of credits to a college, university or institution. Any decision on the comparability, appropriateness and applicability of credit and whether they should be accepted is the decision of the receiving institution.

### **Student Acknowledgments:**

1. I hereby acknowledge receipt of the school's catalog dated 2020, which contains information describing programs offered, and equipment/supplies provides. The school. Catalog is included as part of this enrollment agreement and I acknowledge that I have received a copy of this catalog. \_\_\_\_\_ Student initials.
2. I have carefully read and received an exact copy of this enrollment agreement. \_\_\_\_\_ Student initials.
3. I understand that the school may terminate my enrollment if I fail to comply with attendance, academic, and financial requirements or if I fail to abide by established standards of conduct, as outlined in the school catalog. While enrolled in the school, I understand that I must maintain satisfactory academic progress as described in the school catalog and that my financial obligation to the school must be paid in full before a certificate may be awarded. \_\_\_\_\_ Student initials.
4. I understand that the school does not guarantee job placement to graduates upon program completion or upon graduation. \_\_\_\_\_ Student initials.
5. I understand that complaints, which cannot be resolved by direct negotiation with the school in accordance to its written grievance policy, the student may file a complaint with the State Council of Higher Education for Virginia. The student should submit written complaints to: State Council of Higher Education for Virginia, Private and out-of-State Postsecondary Education, 101 N. 14<sup>th</sup> Street, 9<sup>th</sup> Floor, James Monroe Building, Richmond, VA 23219. Students are not subject to unfair action/treatment as a result of the initiation of a complaint. \_\_\_\_\_ Student initials.

**Contract Acceptance**

I, the undersigned, have read and understand this agreement and acknowledge receipt of a copy. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreements and may not be modified without the written agreement of the student and the School Official. I also understand that if I default upon this agreement I will be responsible for payment of any collection fees or attorney fees incurred by **Virginia Technical Institute**.

My signature below signifies that I have read and understand all aspects of this agreement and do recognized my legal responsibilities in regard to this contract.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of School Official

\_\_\_\_\_  
Date