



Professional Medical Careers Institute (PMCI)



Main Campus*: 920 Hampshire Road Suite S Westlake Village, CA 91361

Tel# (805)497-4064; Fax# (805) 497-4224

Toll Free: 866-500-6274 www.pmcicareers.com

*Instruction takes place at main campus

VOCATIONAL NURSING PROGRAM ENROLLMENT AGREEMENT

November 2018 Cohort Group (covering period: 11/5/2018- 3/26/2020)

Name: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Last 4 Digits of Social Security Number: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Program Length (in months): Approximately 16 months including breaks.

Start Date: November 5, 2018 End Date on or about March 26, 2019 (subject to change)

**State Approved by the California State Board of Vocational Nursing and Psychiatric Technicians on 2/25/11
Approved by the Board of Private Post-Secondary Education.**

November (AM/PM) Schedule:

Classroom instruction is held on Monday through Thursday from 4 pm until 9 pm for the first 8 weeks.

Clinical instruction is held on Wed/Thurs from 6:15AM to 2:15PM after first 8 weeks of training with theory training on Monday and Tuesday from 4 pm – 8:30 pm.

Professional Medical Careers Institutes (PMCI's) Vocational Nursing program is a 1545 hour nursing program (approximately) consisting of academic coursework (about 585 hours) and practical application of theory and skills in the clinical setting (about 960 hours).

Type of Document Awarded upon Completion: After successfully completing all requirements of the course, the student will receive a *Certificate of Completion and a Vocational Nursing Diploma and all the forms necessary to take the NCLEX PN examination if cleared academically and financially.*

TRANSFER OF CREDITS

NOTICE CONCERNING TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT OUR INSTITUTION

The transferability of credits you earn at PMCI is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the diploma you earn in Vocational Nursing is also at the complete discretion of the institution to which you may seek to transfer. If the diploma that 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 PMCI to determine if your diploma or coursework will transfer.

ITEMIZATION OF FEES AND CHARGES

-Registration Fee (<i>non-refundable</i>)	\$ 75.00
-Tuition Fee includes:	
Clinical and Theory Instruction, Clinical Placement	\$ 26000.00
-STRF Fee (<i>non-refundable; assessed at \$.00 per each \$1,000 of institutional charges</i>)	\$ 0.00
-Textbooks (<i>non-refundable if used or wrapper removed- \$150 handling fee if cancelled after ordered</i>)	
\$ 1,300.00	
-Equipment & Uniform Fee (<i>non-refundable if used or package opened</i>)	\$ 1,050.00
-ATI Books/Tests/Exit Exam* (<i>non-refundable</i>)	\$ 425.00
-Graduation Fee	\$ 250.00
-Lab & Insurance Fees	\$ 950.00
<u>SEPARATE FEES</u>	
-Clinical and Theory Absence Fee (<i>non-refundable per each absence</i>)	\$ 50.00
-CPR Class (if needed)*	\$ 65.00
-TFC and in-house Contract Fee (<i>non-refundable, applicable if *TFC payment option is chosen</i>)	\$ 50.00
(* These charges are paid to an entity other than PMCI if the TFC plan is chosen)	

ADDITIONAL MISCELLANEOUS CHARGES

-Returned Check Fee	\$ 50.00
-Late Fee	\$ 35.00

Deposit Amount Made : _____ Date: _____ Initials: _____

PAYMENT METHOD AND TERMS OF PAYMENT

The application fee is due upon initial enrollment. PMCI accepts cash, checks, cashier's checks, credit cards and money orders as forms of payment. Payment of the application fee does not guarantee a spot in the program. **A minimum refundable \$2000 tuition fee is due before class starts, if books have been purchased there is a \$150 return/handling fee to return them.** Payment plan options offered by PMCI are detailed on page 4. If payment is not received according to the agreed upon payment plan, the student will not be allowed to start class or continue in the program, unless prior payment arrangements have been made with the school's Director or Finance Office. Failure to pay any balances according to the chosen plan may result in suspension from the program until payment(s) (including applicable late fees) are made. In addition, the student will not be cleared to take the NCLEX PN Exam nor be allowed to walk at graduation.

While PMCI does not currently offer financial aid through any federal or state government program, any loan securement is the sole responsibility of the student. 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 the student defaults on a federal, state or personal loan both the following may occur, 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. The student may not be eligible for any other federal student financial aid at another institution or other government assistance until the loan is repaid.

In the event of defaulted payments, the undersigned student may be denied continuance until the remaining balance and any applicable late fee charges are fully paid. Additionally, students may be liable for any and all expenses for recovery of due payments including but not limited to attorney's fees, collection agency fees and other administrative costs. For details regarding this policy, please see the Arbitration Agreement found on page 6 of this document.

The undersigned student promises to pay the program fee according to one of the 5 payment options established by PMCI. The student understands the total tuition fee must be completely paid before the student can be cleared of financial obligation with PMCI's nursing program. Any default of installment payments (ANY late or missed payment) is in violation of this enrollment agreement and will be the basis for dismissal from the course, ineligibility to receive the forms to take the NCLEX PN Exam and ineligibility to walk at the graduation ceremony. The student also understands that any **RETURNED CHECKS will be subject to an additional \$50.00 processing fee (per check)** payable to PMCI. Acceptable replacements for any returned check and subsequent installment

payments will be in Cash, Money Order or Credit Card until tuition fee balance is paid in full. Any student who pays late or has a check returned NSF will be required to pay in full before NCLEX PN paperwork or transcripts will be released. **Any payments received after the due date will incur a late fee of \$35 that is added to the account monthly. Those who are more than one week past-due may be suspended or terminated from the program for non-payment.**

STUDENT TUITION RECOVERY FUND

Student's rights and responsibilities with the respect to the Student Tuition Recovery Fund .It is now a state requirement that a student who pays his or her tuition is required to pay a state-imposed assessment for the Student Tuition Recovery fund.

“The State of California established the Student Tuition Recovery Fund (STRF) to 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 obligation 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, and prepay all or part of your tuition. You are not eligible for protection from the STRF and you are not required to pay the STRF assessment, if you are not a California resident, or are not enrolled in a residency program.”

“It is important that you keep copies of your enrollment agreement, financial aid documents, receipts, or any other information that documents the amount paid to the school. Questions regarding the STRF may be directed to the Bureau for Private Postsecondary Education, 2535 Capital Oaks Drive, Suite 400, Sacramento, AA 95833, 916-431-6959 or 888-370-7586.”

To be Eligible for the STRF, you must be a California resident or are enrolled in a residency program, prepaid tuition, paid or deemed to have paid the STRF assessment, and suffered an economic loss as a result of any of the following:

1. The institution, a location of the institution, or an education program offered by the institution was closed or discontinued, and you did not choose to participate in a teach-out-plan approved by the Bureau or did not complete a chosen teach-out plan approved by the Bureau.
2. You were enrolled at an institution or a location of the institution within the 120 day period before the closure of the institution or location of the institution, or were enrolled in an educational program within the 120 day period before the program was discontinued.
3. You were enrolled at an institution or a location of the institution more than 120 days before the closure of the institution or location of the institution, in an educational program offered by the institution as to which the Bureau determined there was a significant decline in the quality or value of the program more than 120 days before closure.
4. The institution has been ordered to pay a refund by the Bureau but has failed to do so.
5. The institution has failed to pay or reimburse loan proceeds under a federal student loan program as required by law, or has failed to pay or reimburse proceeds received by the institution in excess of tuition and other costs.
6. You have been awarded restitution, a refund, or other monetary award by an arbitrator or court, based on a violation of this chapter by an institution or representative of an institution, but has been unable to collect the award from the institution.
7. You sought legal counsel that resulted in the cancellation of one or more of your student loans and have an invoice for services rendered and evidence of the cancellation of the student loan or loans.

To qualify for STRF reimbursement, the application must be received within four (4) years from the date of the action or event that made the student eligible for recovery from STRF.

A student whose loan is revived by a loan holder or debt collector after a period of non-collection may, at any time, file a written application for recovery from STRF for the debt that would have otherwise been eligible for recovery. If it has been more than four (4) years since the action or event that made the student eligible, the student must have filed a written application for recovery within the original four (4) year period, unless the period has been extended by another act of law. However, no claim can be paid to any student without a social security number or a taxpayer identification number."

Enrollment Agreements for students whose primary language is not English:

An enrollment agreement shall be written in language that is easily understood. If English is not the student's primary language, and the student is unable to understand the terms and conditions of the enrollment agreement, the student shall have the right to obtain a clear explanation of the terms and conditions and all cancellation and refund policies in his or her primary language. Please inform PMCI of your need for an enrollment agreement in a language you understand.

Student Initial _____ Parent Initial (If applicable) _____

PMCI'S RIGHT TO CANCEL/SUSPEND OR TERMINATE

The school may cancel, suspend or terminate the Enrollment Agreement at any time if the undersigned student violates any of the following policies and/or agreements:

- Failure to maintain satisfactory progress in the program.
- Failure to comply with the school's attendance policy, confidentiality policy or other school policy.
- Failure to comply with the school's student professional conduct policy.
- Failure to meet all financial obligations to the school and monthly payments.
- Violation of any of the conditions as set forth and agreed to in the Enrollment Agreement.

The school also reserves the right to change or modify the program contents, instruction, curriculum, clinical time, equipment, staff, or materials as it deems necessary. Such changes may be necessary to keep pace with technological advances, to cooperate with clinical training venues, to replace instructors who are not available and to improve teaching methods or procedures. In no event will such changes diminish the competency or content of any program or result in any additional charges to the student.

STUDENT PAYMENT PLAN OPTIONS BASED ON TOTAL PROGRAM COST of \$29,975.00

	Option #1 5% Tuition Savings =	Option #2 3% Tuition Savings =	Option # 3 Monthly payments
Application Fee	\$75	\$75	\$75
Pre-Installment (Due on or before October 12, 2018)	\$2,000	\$2,000	\$2000
Tuition Paid in Full (Due on or before December 7, 2018)	\$26,675 * (\$1300 Saved)		\$1645.59* For 17 months
Installment #1 (Due by December 7, 2018)		\$6,080* (\$195 Saved)	
Installment #2 (Due by March 18, 2019)		\$6,905* (\$195 Saved)	
Installment #3 (Due by July 29, 2019)		\$7,005* (\$195 Saved)	
Installment #4 (Due by December 14, 2019)		\$7,205* (\$195 Saved)	

	Option #4*** 6% Interest Payments through TFC or In-house	Option #5*** 8% Interest Payments through TFC or in-house	Other plan Must be approved
Application Fee	\$75	\$75	\$75
In house contract fee	\$50	\$50	\$50
Or TFC Contract Fee	\$50	\$50	\$50
Pre-Installment (Due on or before October 12, 2018)	\$2,500	\$3,000	\$2000 minimum
Monthly Payment Installments (Due date based on contractual monthly due date)	\$1000*/month for 16 months	\$850*/month for 16 months	
Balloon/Exit Payment (Due March 20, 2020)	\$5,000 Other: _____	\$6,500 Other: _____	
Monthly Payment Installments after completion (Must start by May 5, 2020)	\$500*/month for 16 months	\$500*/month for 16 months	

Final Balloon Payment (Final payment of contract)	(app) \$512.50 Jan 2022	(app) \$ 1,818.30 Jan 2022	
Total Interest Paid	\$2,037.50**	\$2,943.30	

(*Indicates that this amount is owed *PRIOR* to scholarship being deducted from total amount due – it may be less depending on discount)

(**Indicates that this is the maximum amount of interest accrued – There is NO penalty for early pay off of a TFC or in-house contract.)

(*VN students may not have NCLEX paperwork submitted until their overall balance is at or below \$6,000)**

PMCI also requires a Personal Guarantee and a Credit Card Authorization on file for students leaving with a balance and payment plan.

No transcripts will be released until the amount owed to PMCI for services rendered and materials provided is paid in full.

I have reviewed the above fees and payment options and select Option: 1 ___ 2 ___ 3 ___ 4 ___ 5 ___

Other arrangement: _____

Student's Signature: _____ **Date:** _____

Administrator's Signature: _____ **Date:** _____

Director's Signature: _____ **Date:** _____

REFUND POLICY

STUDENT'S RIGHT TO CANCEL

Each student has the right to cancel/voluntarily terminate the program and obtain a refund of charges paid through attendance at the first class session or the seventh day after enrollment, whichever is later. If a student wishes to cancel/terminate the enrollment agreement or withdraw from the institution, the student must notify PMCI. Notice may be hand delivered or mailed. Verbal, telephone or email withdrawals are acceptable. The withdrawal letter may be mailed to:

**Professional Medical Careers Institute
Attention: Director of Nursing/Administration
920 Hampshire Road, Suite S, Westlake Village, CA 91361**

Last Acceptable Date of Withdrawal for Full Refund: (7 Days after enrollment or first class session – whichever is later) May 17, 2018

If the student withdraws from a course after instruction has started, the student may receive a pro-rated refund for the amount of instruction paid for but not received. Refund calculations will be based on the day a withdrawal letter is received. NOTE: A student is charged for an entire week not by the day. An instructional week is approximately \$433.33. If books are purchased for a student and they cancel after books are ordered for them they will be charged a handling/return fee of \$150 to ship and return unused books. If a book is opened and used the student will be charged in full for that book. Those who withdrawal from the program will not receive discounts or scholarships. Discounts of any type will not be added to the refund given.

No refunds will be given if the student has attended more than 75% of each semester and the student concerned will still be liable for any tuition due for that semester. Also, if the student has received federal student financial aid funds, the student is entitled to a refund of money not paid from federal student financial aid program funds.

The school reserves the right to cancel or reschedule a class start date due to insufficient enrollment. If this occurs, the student may request a full refund of all money paid less the application fee, or apply all money paid to the next scheduled class start date.

PLEASE NOTE: The "Itemization of Fees and Charges" on page 2 has detailed information on refundable and non-refundable items. All refunds will be paid within 30 days from receipt of cancellation or withdrawal letter.

Student Initial _____

DISCLAIMER OF EMPLOYMENT GUARANTEE

While the school offers job placement assistance and referral, the school cannot, in any way, guarantee employment after the student has successfully completed the program of study. Likewise, the school does not guarantee that the student will pass the necessary national or state examination necessary for obtaining a license or certificate

Student Initial _____

SPECIAL REQUIREMENTS FOR GRADUATION

The following requirements must be met by a student in order to qualify for a PMCI Diploma in Vocational Nursing and signed documents necessary for State examination:

- **Achieve a cumulative grade of “C” or higher in academic and clinical classes – 75% minimum.**
- **Attend 100% of the scheduled hours of the program for theory and 100% of clinical. Must complete all makeup.**
- **Complete all designated requirements (tests, assignments, case studies, homework) of the program.**
- **Satisfy all financial obligations to the school as agreed upon in this instrument.**

ARBITRATION AGREEMENT

Any dispute arising from enrollment at *PMCI School of Nursing/dba Professional Medical Careers Institute, LLC* no matter how described, pleaded or styled, shall be resolved by binding arbitration under the Federal Arbitration Act conducted by the American Arbitration Association (“AAA”) at *Ventura, California*, under its Commercial Rules. All determinations as to the scope, enforceability of this Arbitration Agreement shall be determined by the Arbitrator, and not by a court. The award rendered by the arbitrator may be entered in any court having jurisdiction.

Student’s Initial _____

“NOTICE”

“YOU MAY ASSERT AGAINST THE HOLDER OF THE 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 YOU HAVE ALREADY PAID UNDER THE PROMISSORY NOTE.”

ADDENDUM

Agreement to Binding Arbitration and Waiver of Jury Trial

I, _____ agree that any dispute arising from my enrollment at PMCI School of Nursing/dba Professional Medical Careers Institute/ no matter how described, pleaded or styled, shall be resolved by binding arbitration under the substantive and procedural requirements of the Federal Arbitration Act, conducted by the American Arbitration Association (“AAA”) at Ventura, California, under its Commercial Rules. All determinations as to the scope, enforceability and effect of this arbitration agreement shall be decided by the arbitrator, and not by a court. The award rendered by the arbitrator may be entered in any court having jurisdiction.

I. Terms of Arbitration

1. Both Student and the School irrevocably agree that any dispute between them shall be submitted to Arbitration.
2. Neither the student nor the School shall file or maintain any lawsuit in any court against the other, and agree that any suit filed in violation of this Agreement shall be dismissed by the court in favor of an arbitration conducted pursuant to this Agreement.
3. The costs of the arbitration filing fee, arbitrator’s compensation and facilities fees will be paid by the School, to the extent these fees are greater than a Superior Court filing fee.
4. The Arbitrator’s decision shall be set forth in writing and shall set forth the essential findings and conclusions upon which the decision is based.
5. Any remedy available from a court under the law shall be available in the arbitration.

II. Procedure in Filing Arbitration

1. Students are strongly encouraged, but not required, to utilize the Grievance Procedure described in the student handbook prior to filing arbitration.
2. A student desiring to file arbitration should first contact the School Director or Administrator, who will provide the student with a copy of the AAA Commercial Rules. A student desiring to file arbitration should then contact the American Arbitration Association at Ventura, California, which will provide the appropriate forms and detailed instructions. The student should bring this form to AAA.
3. A student may, but need not, be represented by an attorney at the Arbitration.

III. Acknowledgement of Waiver of Jury Trial and Availability of AAA Rules

By my signature below, I acknowledge that I understand that both the school and I are irrevocably waiving rights to a trial by jury, and are selecting instead to submit any and all claims to the decision of an arbitrator instead of a court. I understand that the award of the arbitrator will be binding, and not merely advisory.

I also acknowledge that I may at any time, before or after my admission, obtain a copy of the rules of the American Arbitration Association, at no cost, from the School Director.

STUDENT ACKNOWLEDGEMENT

THIS AGREEMENT IS A LEGALLY BINDING INSTRUMENT WHEN SIGNED BY THE STUDENT AND ACCEPTED BY PROFESSIONAL MEDICAL CAREERS INSTITUTE. Your signature on this agreement acknowledges that you have been given reasonable time to read and understand it, and that you have been given: (a) written statement of the refund policy and how it applies and; (b) a catalog including a description of the course or education service, including all material facts concerning the school and the program or course of instruction which are likely to affect your decision to enroll. *Immediately upon signing this agreement, you will be given a copy of it to retain.*

Prior to signing this enrollment agreement, you must be given a catalog (sent electronically) or brochure and a School Performance Fact Sheet, 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.

Student Initial _____

TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE \$29,975.00
(See payment options on page 4.)

ESTIMATED TOTAL CHARGES OF ENTIRE EDUCATIONAL PROGRAM \$30,050.00
(Including application fee and assuming no unexcused clinical absences)

TOTAL MINIMUM STUDENT IS REQUIRED TO PAY UPON ENROLLMENT \$2,000.00

TOTAL CHARGES AFTER DISCOUNT/SCHOLARSHIP: _____
(Does not include \$75.00 non-refundable application fee)

By signing below I certify that I have received an explanation and copy of this contract, the School handbook, and graduation requirements, physical demands, work conditions and safety, attendance, behavior and confidentiality requirements have been explained to me. I also certify that I have visited and toured the school facilities.

I understand that this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution's cancellation and refund policies have been clearly explained to me.

Signature of Student _____ Dated: _____

Signature of Parent (if student is under the age of 18) _____ Dated: _____

Signature of School Official _____ Dated: _____

Signature of Director _____ Dated: _____

Any questions a student may have regarding the enrollment agreement that have not been satisfactorily answered by the institution may be directed to the Bureau for Private Postsecondary Education at:

2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833 (888) 370-7589 or fax (916) 263-1897, www.bppe.ca.gov

A student or any member of the public may file a complaint about this institution with the 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