

Student Enrollment Agreement

SCHOOL INFORMATION

Texas Regional Healthcare Training Center

Hybrid Course

737-255-6008

STUDENT INFORMATION

Student Name:		Date of birth:	
Street address:		City/State/Zip:	
Telephone:		SSN# / ITIN#:	
E-mail Address:			
High school / College attended:			
Circle one:	Diploma / GED / 18 years old		
	Notes: Minimum age of student allowed is 16 years old. All students under 18 must have parent/guardian signature below		

COURSE and COURSE COST

Course Name:	Texas Regional Healthcare Training Center – Nurse Aide		
Course Length:	100 hours	Date the class is to begin:	
Tuition:	\$940.00	CPR	N/A
Books:	\$0.00	State Test	N/A
Supplies:	\$0.00	Admin Fee	\$125.00
Registration:	\$135.00		
* Fee is estimated and based on current cost and subject to change.			
TOTAL COST:	\$1,200.00		

METHOD OF PAYMENT

Method of Payment (check one)			
Money Order (yes)	PayPal Buy Now Pay Later (yes)	Affirm (yes)	Credit/Debit card (yes)
Note: Student may be charged interest fee for credit card payments.			
<p>“Any holder of this consumer credit contract is subject to all claims and defenses which the debtor could assert against the seller of goods or services obtained pursuant hereto or with the proceeds hereof. Recovery hereunder by the debtor shall not exceed the amounts paid by the debtor hereunder. “</p>			

This student has received a copy of the school enrollment agreement and catalog.

CANCELLATION POLICY

Refund/Cancellation/Retake & Attendance Policy

The tuition and fees paid by the applicant/agency or client shall be refunded if the applicant is rejected by the school before enrollment. Examples of rejection may be but not limited to criminal history, or rejection from previous training programs. An application fee of not more than \$125.00 will be retained by the school if the application is denied. All tuition and fees paid by the applicant shall be refunded if requested within three business days after signing the student enrollment contract with the school. There is a non-refundable fee of \$125 (application, administration and Background check fee) retained by the school. All tuition and fees paid by the applicant shall be refunded within 30 days. After three business days of signing student enrollment contract, there are **NO REFUNDS**.

If a student completes and submits a student enrollment contract and it is past the mandated three-day refund rule; there will be no refund and the student will be required to take the course during the timeframe of which they registered for. If a student cannot fulfil the agreement they have signed by attending the course in the timeframe indicated on their contract, the student will then forfeit their payment with no refund. That student may sign up for the very next course and will be charged full price and will be subject to the same refund policy requirements.

If you receive any scholarships or financial help from any agency or paid out of pocket once you signed your application with this school, you have 3 business days to cancel your enrollment, after the three business days **THERE IS NO REFUND**. You may apply your funds to a different session or different program.

If you are a State of Texas Scholarship Recipient and you were awarded after you had already paid your deposit or full tuition, once the school receive scholarship funds (4-6 weeks after program start) you will be issued a refund minus our administration fee of \$125. The scholarship amount must cover full tuition to be eligible for a refund. Please contact our office if you have any questions.

Cancellation

Texas Regional Healthcare Training Center holds the right to cancel any class due to: Inclement weather, low class enrollment, covid outbreaks or anything that compromises the health and safety of our students and staff. Clinicals and/or externships may be delayed or even cancelled at the discretion of the facility or agency due to covid outbreaks.

Clinical Attendance & Absence Policy

The Health & Human Services Commission (HHS) mandates that each student must complete exactly 40 clinical hours with no absences to meet state certification requirements. Students must plan accordingly, handle all personal matters prior to the course, and ensure punctual attendance for each scheduled clinical day.

Texas Regional Healthcare Training Center reserves the right to withdraw students who are tardy or absent from the course. Withdrawn students are not eligible for any refund and may only attempt to retake the clinical portion if space is available in a future session. If no space is available, students must re-enroll at full tuition.

If a student is dropped due to absence, they may make up the missed hours at a rate of \$15 per hour, contingent on seat availability in the next month's clinical session. If no space is available, the student must wait for the next available session and pay full tuition to re-enroll.

Example Scenarios:

A student who attends Monday and Tuesday but misses Wednesday and Thursday will forfeit the remainder of the clinical week, including Friday, and must reschedule their training.

A student who completes only 16 hours before an absence must make up the remaining hours at \$15 per hour, pending availability. If no immediate space is available, they must re-enroll in a future session at full tuition cost.

Texas Regional Healthcare strictly enforces this policy to ensure compliance with state regulations and uphold the integrity of the training program. By enrolling, students acknowledge and accept these attendance requirements.

REFUND POLICY

ACKNOWLEDGMENTS

Approved and regulated by the Texas Workforce Commission, Career Schools and Colleges, Austin, Texas.

I have received a copy of this enrollment agreement and current school catalog.

Student Initials: ()

I acknowledge that I have read and fully understand the refund policy.

Student Initials: ()

I understand that I am required to have proof of a negative TB skin test prior to the start of class.

Student Initials: ()

Signature of Student or Guardian

Date

Printed Name of Student

Signature of Authorized School Official

Date

Printed Name of Authorized School Official