

ONE STOP FINGERPRINTING TRAINING CENTER

EKG TECHNICIAN TRAINING PROGRAM

STUDENT REGISTRATION FORM • 6-WEEK PROGRAM

Tuition \$0 — FREE	Registration Fee \$150	National Certification Exam Paid separately by student
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Please complete all applicable fields. Tuition for this 6-week training opportunity is free. Students are responsible for the \$150 registration fee and the separate national certification examination fee. The certification exam fee is not included in the registration fee.

1. STUDENT INFORMATION

Full Legal Name: _____	Date of Birth: _____
Street Address: _____	City / State / ZIP: _____
Phone Number: _____	Email Address: _____
Preferred Name (if different): _____	Emergency Contact: _____
Emergency Contact Phone: _____	Relationship: _____

2. PROGRAM INFORMATION

Program: EKG Technician Training Program	Program Length: 6 weeks
Preferred Start Date: _____	Training Format: ☐ Online ☐ In person ☐ Hybrid

3. FEES AND PAYMENT ACKNOWLEDGMENT

☐ I understand that program tuition is free. I am responsible for paying the \$150 registration fee. ☐ I understand that the national certification examination fee is separate and is paid by me. ☐ I understand that I may need to meet additional eligibility requirements set by the certifying organization.

Registration Fee: \$150	Payment Date: _____
Payment Method: ☐ Cash ☐ Card ☐ Online ☐ Other: _____	Receipt / Transaction No. (if applicable): _____

4. STUDENT ACKNOWLEDGMENT

I certify that the information provided on this form is accurate to the best of my knowledge. I understand that submitting this form does not guarantee admission, national certification, or employment. Completion of the training program does not automatically confer certification; I must satisfy the applicable certifying organization's requirements and pass its examination. I have had the opportunity to ask questions about the program and fees.

Student Signature: _____	Date: _____
Parent / Guardian Signature (if applicable): _____	Date: _____

5. OFFICE USE ONLY

Form Received By: _____	Date Received: _____
Registration Fee Verified: ☐ Yes ☐ No	Enrollment Status: ☐ Pending ☐ Accepted
Notes: _____	

Fee policy: Review the school's written refund and withdrawal policy before payment. Any refund terms should be provided to students before the registration fee is collected.

Thank you for your interest in One Stop Fingerprinting Training Center.