**Application for Admission To:**

**Polished Nail Academy’s Nail Technology Program**

**Application for Admission to:**

**Polished Nail Academy’s Nail Technology Program**

 This application including the following application materials: 1. Questionnaire for Application; 2. Nail Tech Industry Research Interview Notes, completed fully and accurately, in conjunction with the catalogwill constitute a binding agreement between **Polished Nail Academy** and the student, upon acceptance of said application by **Polished Nail Academy** and the clearing of funds provided by the student for the initial deposit, due three days before the start of school.

Class Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Anticipated Completion Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact information for the applicant:**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the applicant is under 18 years of age, contact information for the Parent or Guardian is required:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact information for the school**:

**Polished Nail Academy**

500 SW 10th Street, Suite #305, Ocala, FL 34471

Telephone Number: 352/694-6245

**Time Required for Graduation**:

 Total number of weeks of program:

 Day time student: 8 weeks

 Night time student: 15 weeks

Total Hours:180 hours

**Requirements for Graduation:**

1, Completion of 180 hours of topic (120 hours) and service (60 hours).

1. Pass a final practical and written examination with 70%, Letter Grade of C or more.
2. Meeting all financial obligations with the school.

**Diploma** is awarded upon satisfactory completion of all requirements for graduation.

**Before enrolling**, potential students with certain felony convictions should contact the Florida Board of Cosmetology, Department of Professional and Business Regulations to determine their eligibility to obtain licensure prior to enrollment at the Institute. The Board may be reached at: Division of Professions, Board of Cosmetology,2601 Blair Stone Road Tallahassee, FL 32399-0793, Phone: (850) 487-1395.

**Tuition:**

**Total cost of 8 week (day) or 15 week (night) program:**

**$3,000**

**Breakdown of total cost:**

 **$1,500 Deposit breakdown:**

 Book rental $150.00

 Kit $550.00

 Tuition $500.00

 Insurance $150.00

Registration: $150.00

 **Total: $1,500.00**

 **$1,500 Balance breakdown:**

Tuition $1,500.00

 **Total: $1,500.00**

Payments are due as follows:

$1,500 Due 3 weeks prior to the first day of the course

 $750 Due the first day of the beginning of the third week

 $750 Final payment due the first day of the beginning of the sixth week.

Please note: there will be a credit card swipe fee of 2.86% per swipe.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Annual Percentage Rate  | Finance Charge  | Amount Financed The dollar amount credit provided to you on your behalf (source):\_\_\_\_\_\_\_\_\_\_  | Total of Payment the amount you will have paid after you have made all payments scheduled.  | Total Sales Price the total cost of your purchase on credit including your down payment of:  |
| \_\_\_\_\_\_\_\_\_% | $\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_ |
| Your Payment Schedule Will Be: |   |   |   |   |   |   |
| Number of Payments  | Amount Each Payment  | When Payments Are Due |   |   |
| Beginning on \_\_\_/\_\_\_/\_\_\_ and on the same day each  |
| (Check one) \_\_\_\_\_Weekly \_\_\_\_\_Bi- weekly \_\_\_\_ Monthly |

Terms of payment:

 Polished Nail Academy will accept the following forms of payment:

1. Personal check (funds must be cleared three days before the start of school.

 Note: the person writing the check must provide a photocopy of his/her

 driver’s license or id.

2. Credit card: there will be a credit card swipe fee of 2.86% per swipe

3. Debit card: there will be a debit card swipe fee of 2.86% per swipe

4. Cash

**Student Cancellation and Refund Policy:**

**Total cost of 8 week (day) or 15 week (night) program:**

**$3,000**

**Breakdown of total cost:**

 **$1,500 Deposit breakdown:**

 Book rental $150.00

 Kit $550.00

 Tuition $500.00

 Insurance $150.00

Registration: $150.00

 **Total: $1,500.00**

 **$1,500 Balance breakdown:**

Tuition $1,500.00

 **Total: $1,500.00**

 Should a student’s enrollment be terminated or cancelled for any reason, all refunds will be made according to the following refund schedule. This schedule is applicable to all students whether they pay in full before classes start or by installments during the course of study.

1. Cancellation can be made in person, by electronic mail, by Certified Mail or by termination.
2. If the school does not accept the applicant or if the student cancels within three (3) business days after signing the Application or Enrollment Agreement, the student’s funds will be refunded.
3. Cancellation after the third (3rd) Business Day, but before the first class, results in a refund of all monies paid, with the exception of the following fees\*:

-Registration fee (not to exceed $150)

-Books fee ($150)

-Kit Fee ($550)

\*Please see **RULE 6E-1.0032(6)(i):** The refund policy shall provide for cancellation of any obligation, other than a book and supply assessment for supplies, materials and kits which are not returnable because of use, within 3 working days from the student’s signing an enrollment agreement or contract.

1. Cancellation after attendance has begun, through 40% of the program, will result in a Pro Rata refund computed on the number of hours completed to the total program hours.
2. Cancellation after completing more than 40% of the program will result in no refund.
3. Termination Date: In calculating the refund due to a student, the last date of actual attendance by the student is used in the calculation unless earlier written notice is received.
4. All refunds will be made within 30 days.

**Academic Calendar and Class Schedule:**

**Class Calendar for the Academic Year of April 10, 2023-December 11, 2023:**

Holidays:

**2023**

Monday, May 29, 2023 – Memorial Day

 Tuesday, July 4, 2023 – Independent Day

 Monday, September 4, 2023 – Labor Day

 Thursday, November 23, 2023 – Thanksgiving

 Monday, December 25, 2023 - Christmas

**Class Schedule:**

Students attend either day time classes, Monday through Thursday, 10am to 4pm or night time classes, Monday through Thursday, 5:30pm to 8:30pm.

 **Day Time Calendar**

Start Date: Completion Date:

Monday, April 10, 2023 Thursday, June 1, 2023

Monday, May 15, 2023 Thursday, July 6, 2023

 Monday, June 19, 2023 Thursday, August 10, 2023

 Monday, July 24, 2023 Thursday, September 14,2023

 Monday, August 28, 2023 Thursday, October 19, 2023

 Monday, October 2, 2023 Monday, November 27, 2023

 Monday, November 6, 2023 Thursday, December 28, 2023

 Monday, December 11, 2023 Thursday, February 1, 2024

 **Night Time Calendar**

Start Date: Completion Date:

Tuesday, May 30, 2023 Thursday, September 7, 2023

 Monday, July 24, 2023 Thursday, November 2, 2023

 Monday, September 18, 2023 Thursday, December 28, 2023

 Monday, November 13, 2023 Thursday, February 22, 2024

In case of school closure due to weather event, lock down, etc.:

Polished Nail Academy will follow the guidelines of the Marion County Public Schools for closure in the case of an emergency or weather event such as a hurricane. During the summer months, we will follow the guidelines provided by the City of Ocala, Marion County Emergency Services and the State of Florida.

In all cases, should the school be closed, students can count on rapid and detailed communication from the school director:

1. Updating the website within 24 hours of the emergency including the condition of the school, its projected reopening and a make-up schedule. This information will be updated on a regular basis should a continuing emergency such as a lock down occurs. Otherwise, in the case of weather, the school will reopen as soon as the emergency has been officially declared over. All students will be expected to follow the online posted make-up schedule to ensure that no learning time is lost to the emergency.
2. Sending of emails and texts to students with detailed instructions about school expectations of them in terms of online study until we can get back into the building.

**Termination or Alteration of this Binding Document:**

The following policy will govern all decisions to terminate or alter this Application for Admission to **Polished Nail Academy’s** Nail Technology Program.

Application Policy:

Students agree to the following conditions:

1. To attend school regularly including all classes and practice/services as scheduled *including* Saturdays or evenings as needed.
2. To comply with Satisfactory Academic Progress Policy, school rules and regulations as outlined in the catalog.
3. To meet all financial obligations to **Polished Nail Academy** before being allowed to take the final examination.
4. All students who wish to apply to attend **Polished Nail Academy’s** Nail Technology Program shall complete the application. Applicants must be at least 16 years of age. Minor applicants, those under the age of 18, must have parent or guardian approval to apply.
5. Students/parents or Guardian gives **Polished Nail Academy** permission to call a physician or refer student for medical assistance (i.e. call: 911) in the event of sudden illness or accident. Any and all expenses resulting from this incident will be the sole responsibility of the student, his or her parents or guardian.
6. **Polished Nail Academy** will supply all services set forth in this agreement and the catalog within the time limit specified by said agreement. The school reserves the right to dismiss any students for any or all of the following reasons:

 -Non-payment of previously agreed tuition and fees

 -Unsatisfactory Academic Progress

 -Failure to comply with school rules and regulations

**Employment Guarantee Disclaimer:**

No guarantee of placement is made or implied by the school.

**Affirmation of Receipt and Reading of this Application and the Catalog**

The signature below of all signers of this application indicates that they have received and read a copy of the Application for Admission to **Polished Nail Academy’s** Program for Nail Technology and **Polished Nail Academy’s** catalog.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s name printed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian’s name printed if applicant is under 18 years of age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian’s signature Date

 if applicant is under 18 years of age

**Signature of Applicant:**

The signature below of all signers of this application indicates that the applicant desires admission to **Polished Nail Academy’s** Program for Nail Technology. By signing and submitting this application, the student acknowledges that all information is accurate and accepts the responsibility to be aware of and follow codes of conduct, behavior standards and all program specific rules, policies, and procedures. All students are expected to follow the policies and procedures of **Polished Nail Academy.**

Accompanying this application are the following documents prepared by the student for consideration in the application process:

1. Questionnaire for Application

2. Nail Tech Industry Research Interview Notes

The signature by the Director of **Polished Nail Academy** constitutes acceptance of this application.

**Signature by Applicant:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s name printed Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian’s signature, if applicant is under 18 years of age Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian’s name printed

**Acceptance by Polished Nail Academy**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title