



CNA Training Course - Enrollment Agreement

Gateway Achievement, LLC

7151 Lee Hwy, Ste 100, Chattanooga, TN 37421

TO BE PLACED IN EACH STUDENT'S FILE ONCE THEY HAVE SIGNED AND DATED THE FORM

Student Name: _____ Date: _____

Street Address: _____

City, State, ZIP: _____

Telephone Number: _____ Email: _____

Social Security Number: _____ Date of Birth _____ Gender _____

Name of Program: CNA Training Eye Color _____ Race _____ Height _____

Date Program Begins: _____

Date Program Ends: _____

Days and Times of classes: _____

Program Fee: \$750 Book Fees: \$75 Scrub Fees: \$40

Scrub Fees are an approximate cost. This fee is not paid to the institution and students are permitted to purchase at the location of their choice.

Fees will be guaranteed for 12 months from the signing of this document.

Cancellation and Refund Policy in compliance with TN Rule 1540-01-01-.17:

- a. If a student withdraws from the institution on or before the first day of classes, or fails to begin classes, the refund shall equal the sum of all refundable fees paid and, if the student has institutional loans, forgiveness of the amounts owed by the student for the period of enrollment for which the student was charged, less an administrative fee of one hundred dollars (\$100.00)
- b. A student who withdraws at any time is entitled to a full refund of any fee, regardless of whether the fee is included in tuition, paid to the institution for tangible goods or services not delivered to or fully provided to the student.
- c. In addition to the above paragraph, if after classes have commenced and before expiration of ten percent (10%) of the period of enrollment for which the student was charged, a student withdraws, drops out, is expelled, or otherwise fails to attend classes, the refund shall equal seventy-five percent (75%) of all refundable fees paid and, if the student has institutional loans, forgiveness of the loan amount in excess of the twenty-five percent (25%) the student owes the institution, less administrative fee of one hundred dollars (\$100)

- d. In addition to subparagraph (4)(b) of this rule, if after expiration of ten percent (10%) of the period of enrollment for which the student was charged, and before expiration of twenty-five percent (25%) of the period, a student withdraws, drops out, is expelled, or otherwise fails to attend classes, the refund shall equal twenty-five percent (25%) of all refundable fees paid and, if the student has institutional loans, forgiveness of the loan amount in excess of the seventy-five percent (75%) the student owes the institution, less administrative fee of one hundred dollars (\$100); or
- e. In addition to subparagraph (4)(b) of this rule, if after expiration of twenty-five percent (25%) of the period of enrollment for which the student was charged, a student withdraws, drops out, is expelled, or otherwise fails to attend classes, the student may be deemed obligated for one hundred percent (100%) of the tuition and other fees charged by the institution.
- f. For a student who cannot complete one or more classes because the institution discontinued such a class during a period of enrollment for which the student was charged, the institution shall refund the sum of all refundable fees paid and, if the student has institutional loans, forgive the amounts owed by the student.

Determining the official date of termination in compliance with Rule 1540-01-02-.17(5)

When computing refunds pursuant to the default refund policy, the last day of attendance for a student shall be one of the following:

- 1) The date on the expulsion notice if a student is expelled from the institution
- 2) The date the institution receives a written notice of withdrawal from a student
- 3) When no written notice of withdrawal is given, the institution shall use the last day of attendance as the date of withdrawal

Verification that by signing the agreement, the student understands the right to receive an exact signed copy of the agreement.

Verification that by signing the agreement the institution understands its obligation to immediately provide the student an exact signed copy of the agreement.

Gateway Achievement, LLC is authorized by the Tennessee Higher Education Commission. This authorization must be renewed each year and is based on an evaluation of minimum standards concerning quality of education, ethical business practices, and fiscal responsibility.

Student Signature

Date

Director Signature

Date

Gateway Achievement, LLC

7151 Lee Hwy, Ste 100, Chattanooga, TN 37421

Transferability of contact Hours Disclosure

Contact Hours earned at Gateway Achievement, LLC may not transfer to another educational institution. Contact hours earned at another educational institution may not be accepted by Gateway Achievement, LLC. You should obtain confirmation that Gateway Achievement, LLC will accept any contact hours you have earned at another educational institution before you execute an enrollment contract or agreement. You should also contact any educational institutions that you may want to transfer contact hours earned at Gateway Achievement, LLC to determine if such institutions will accept credits earned at Gateway Achievement, LLC prior to executing an enrollment contract or agreement. The ability to transfer contact hours from Gateway Achievement, LLC to another educational institution may be very limited. Your contact hours may not transfer, and you may have to repeat courses previously taken at Gateway Achievement, LLC if you enroll in another educational institution. You should never assume that contact hours will transfer to or from any educational institution. It is highly recommended, and you are advised to make certain that you know the transfer of contact hours policy of Gateway Achievement, LLC and of any other educational institutions you may in the future want to transfer the contact hours earned at Gateway Achievement, LLC before you execute an enrollment contract or agreement.

Signature of Student

Date



Certified Nursing Assistant
School

AUTHORIZATION FOR USE OF IMAGE, VOICE, PERFORMANCE OR LIKENESS

I do permit and authorize Gateway Achievement, LLC. and its affiliates and its employees, agents, and personnel who are acting on behalf of the Gateway Achievement, LLC (collectively the "Company") to use my name, photograph, video, sound/voice recording or other likeness for publicity, marketing, training, and promotion of the Company without compensation to me. I understand my name, photograph, video, sound/voice recording or other likeness may be copied and distributed by means of various media, including, but not limited to, publications, video, television broadcasts/rebroadcasts, radio transmissions/retransmissions, news releases, websites, brochures, billboards or signs. I acknowledge that the Company has the right to make one or more photographs, audio recordings, videotape or disk presentations, or other electronic reproductions of my image, voice or performance in accordance with this agreement. I waive any right to inspect or approve the finished product, or any material in which the Company may eventually use.

I relinquish and give the Company all rights, title, and interests in and to the photograph, video, sound/voice recording or other likeness including any copyright therein. This consent and release shall be binding upon my heirs, successors, assigns, and legal representations.

I understand that, although the Company will attempt to use my name, photograph, video, sound/voice recording or other likeness in accordance with standards of good judgment, the Company cannot warrant or guarantee that any further dissemination of my name, photograph, video, sound/voice recording or other likeness will be subject to Company supervision or control. Accordingly, I release the Company from any and all liability related to dissemination of my photograph of my name, photograph, video, sound/voice recording or other likeness, reproduction, distribution, and display in print or any and all other media, and any alteration, distortion or illusionary effect, whether intentional or otherwise, in connection with said use, including, but not limited to claims of libel, slander, or invasion of privacy. I also understand that I may not withdraw my permission for the use of any photos or other likeness at any time in the future.

I have read and understand the conditions of this consent form.

Signature _____ Date _____

Print Name _____



Gateway Achievement, LLC
7151 Lee Hwy, Ste 100, Chattanooga, TN 37421
Phone: 865-293-5888 or 423-710-1500

PRE-ENROLLMENT CHECKLIST

To be placed in each student's file once they have signed and dated

Date: _____
 Name of Student: _____
 Address: _____
 City State Zip: _____
 Telephone Number: _____ Email Address: _____
 Name of Course: Nurse Aide

Please check mark each section when completed

	Toured the institution
	Received an institutional catalog and if provided electronically understands that the student may request a hard-copy of the catalog at any time
	Was given the time and opportunity to review the institutional policies in the catalog
	Knows the length of the course both classroom/lab/clinical is a total of 75 hours which includes 50 hours classroom/lab combination and 25 hours of offsite clinicals. The entire course will run Monday-Friday from 8:00A-1:00P for 3 consecutive weeks There will be one (1) make up day for five (5) hours the week following the 3 week course
	Has been informed of the total tuition and other fees of the program
	Has been informed of the estimated cost of books and any required equipment purchases such as scrubs, masks, etc.
	Has been given a copy of the institutional refund policy
	Understands any person claiming damage or loss as a result of any act or practice by this institution that is a violation of the Title 49, Chapter 7, Part 20 or Rule Chapter 1540-01-02 may file a complaint with the Tennessee Higher Education Commission. Division of Postsecondary State Authorization (DPSA). DPSA's address is 312 Rosa L Parks Ave, 9th floor, Nashville, TN 37243. Phone number 615-741-5293
	Understands that this is a new program and placement, completion and withdrawal information will be provided by THEC approximately one year after the institution begins offering the program
	Has executed (signed) a Transfer of Credit Disclosure Statement in compliance with T.C.A. 49-7-144 and understands the specific limitations should the institution have articulation agreements

Signature of Director

Date

Signature of Student

Date

