ACE Training Institute

10101 Harwin Dr. Suite 110

Houston, TX 77036

PROGRAM ENROLLMENT AGREEMENT

Start of class date:_____ **Program Name:** Nurse Aide

APPLICANT INFORMATION (ALL FIELDS ARE REQUIRED)

Legal Name_____
First **Middle** **Last name**

Mailing Address:_____
Street **Apt# if applicable**

_____
City **State** **Zip**

Phone #: _____

Email: _____

Programs:

Tuition and Fees:

Nurse Aide	**100 HR [X]**	**Medication Aide**	**140 HR [ ]**
PROMOTION $850.00			
Registration	**$100.00**	**Registration**	**$50.00**
Tuition	**$800.00**	**Tuition**	**$675.00**
Supplies & Background check	**$100.00**	**State Exam**	**$25.00**
TOTAL COST in English	**$1,000.00**	**E-Book and supplies**	**$225.00**
Textbook (optional)	**$50.00**	**TOTAL COST**	**$1,075.00**

State Exam fee paid directly to Prometric

PROMOTION **$900.00**

Revised Effective: 2/3/2022

Permitted tuition installment payments are as follows.

Total Cost for NA $1,000.00
$300.00 upon registration
$300.00 is due by the end of the second week balance of $400.00 is due on or before the fifth week.

Total Cost for MA $1075.00
$300.00 at the time of registration
$337.50 after second week
$337.50 after third week

All payments should be made by cash, money order, check, debit and/or credit card.

- Cash acceptance based on the director's discretion.
- No interest will be charged for installment payments.
- If you are allowed, at the directors' discretion, to continue without paying your balance your certificate of completion will be held until the balance is paid. A $32.00 fee will be charged for any check that is returned unpaid. Delinquency(s) in student's account that results in third party involvement will be at the expenses (cost) of the individual student.

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.

REFUND POLICY FOR PROGRAMS

A full refund will be made to any student who cancels the enrollment contract within 72 hours (until midnight of the third day excluding Saturdays, Sundays and legal holidays) after the enrollment contract is signed. A full refund will also be made to any student who cancels enrollment within the student's first three scheduled class days, except that the school may retain not more than $100 in any administrative fees charged, as well as items of extra expense that are necessary for the portion of the program attended and stated separately on the enrollment agreement.

REFUND POLICY 1. Refund computations will be based on scheduled course time of class attendance through the last date of attendance. Leaves of absence, suspensions and school holidays will not be counted as part of the scheduled class attendance. 2. The effective date of termination for refund purposes will be the earliest of the following: (a) The last day of attendance if the student is terminated by the school; (b) The date of receipt of written notice from the student; or (c) Ten business days following the last date of attendance. 3. If tuition and fees are collected in advance of entrance, and if after expiration of the 72-hour cancellation privilege the student does not enter school, not more than $100 in any administrative fees charged shall be retained by the school for the entire residence program or synchronous distance education course. 4. If a student enters a residence or synchronous distance education program and withdraws or is otherwise terminated after the cancellation period, the school or college may retain not more than $100 in any administrative fees charged for the entire program. The minimum refund of the remaining tuition and fees will be the pro rata portion of tuition, fees, and other charges that the number of hours remaining in the portion of the course or program for which the student has been charged after the effective date of termination bears to the total number of hours in the portion of the course or program for which the student has been charged, except that a student may not collect a refund if the student has completed 75 percent or more of the total number of hours in the portion of the program for which the student has been charged on the effective date of termination. 5. Refunds for items of extra expense to the student, such as books, tools, or other supplies are to be handled separately from refund of tuition and other academic fees. The student will not be required to purchase instructional supplies, books and tools until such time as these materials are required. Once these materials are purchased, no refund will be made. For full refunds, the school can withhold costs for these types of items from the refund as long as they were necessary for the portion of the program attended and separately stated in the enrollment agreement. Any such items not required for the portion of the program attended must be included in the refund. [More simply, the refund is based on the precise number of course time hours the student has paid for, but not yet used, at the point of termination, up to the 75% completion mark, after which no refund is due.] 6. A student who withdraws for a reason unrelated to the student's academic status after the 75 percent completion mark and requests a grade at the time of withdrawal shall be given a grade of "incomplete" and permitted to re-enroll in the course or program during the 12-month period following the date the student withdrew without payment of additional tuition for that portion of the course or program. 7. A full refund of all tuition and fees is due and refundable in each of the following cases: (a) An enrollee is not accepted by the school; (b) If the course of instruction is discontinued by the school and this prevents the student from completing the course; or (c) If the student's enrollment was procured as a result of any misrepresentation in advertising, promotional materials of the school, or representations by the owner or representatives of the school. A full or partial refund may also be due in other circumstances of program deficiencies or violations of requirements for career schools and colleges.

REFUND POLICY FOR STUDENTS CALLED TO ACTIVE MILITARY SERVICE 8. A student of the school or college who withdraws from the school or college as a result of the student being called to active duty in a military service of the United States or the Texas National Guard may elect one of the following options for each program in which the student is enrolled: (a) If tuition and fees are collected in advance of the withdrawal, a pro rata refund of any tuition, fees, or other charges paid by the student for the program and a cancellation of any unpaid tuition, fees, or other charges owed by the student for the portion of the program the student does not complete following withdrawal; (b) A grade of incomplete with the designation "withdrawn-military" for the courses in the program, other than courses for which the student has previously received a grade on the student's transcript, and the right to re-enroll in the program, or a substantially equivalent program if that program is no longer available, not later than the first anniversary of the date the student is discharged from

active military duty without payment of additional tuition, fees, or other charges for the program other than any previously unpaid balance of the original tuition, fees, and charges for books for the program; or (c) The assignment of an appropriate final grade or credit for the courses in the program, but only if the instructor or instructors of the program determine that the student has: (1) satisfactorily completed at least 90 percent of the required coursework for the program; and (2) demonstrated sufficient mastery of the program material to receive credit for completing the program. 9. The payment of refunds will be totally completed such that the refund instrument has been negotiated or credited into the proper account(s), within 60 days after the effective date of termination.

APPROVED AND REGULATED BY THE TEXAS WORKFORCE COMMISSION, CAREER SCHOOLS AND COLLEGES, AUSTIN, TEXAS

Class curriculum is approved by the Texas Health and Human Services Commission (THHSC). Be aware that students cannot be listed as unemployable on the Employee Misconduct Registry (EMR) and cannot have been convicted of a criminal offense as listed in the Texas Safety code 250.006

I _____, have received a copy of the school enrollment agreement and catalog.
(Student's First and Last Name)

Catalog volume # 18

Publication date : 12/08/2021
Effective date : 2/08/2022

Today's date: _____

Stella Iyare
Printed Name – School Official

_____
Printed First and Name - Student

_____
Signature – School Official

_____
Signature – Student

TEXAS WORKFORCE COMMISSION

Career Schools and Colleges

Record of Previous Education and Training

School Name: ACE TRAINING INSTITUTE

Authority for Data Collection: *Texas Education Code, §132.055* and *Texas Administrative Code, §807.191(c)*

Planned Use of the Data: This form must be used by the school in its entirety to provide a record by which previous education and training may be evaluated and credit given to the student and to provide a record of such credit and reduction of program length/cost as required by the law.

Instructions: Complete each item on front and back. If an item is not applicable, write "NA." If credit is being claimed for post-secondary education, a transcript must be provided. Credit for experience should also be granted, if justified by the school's evaluation of the student's skills. Attach additional pages as needed. The completed form is to be maintained in each student's file. A copy of the completed form will be given to the student. Credit for previous education and training cannot be granted until this form is completed and signed by the school official and the student. If clarification is required, contact Career Schools and Colleges.

Student Information

Name: _____ SSN: _____ Date of Birth (mm/dd/yy): _____

Name of Program: NURSE AIDE

Secondary Education: ☐ High School Diploma ☐ Home Schooled ☐ GED

Post-secondary Education

Type of School	Name and Location of School	Dates Attended From MO	Dates Attended From YR	Dates Attended To MO	Dates Attended To YR	Graduated YES	Graduated NO	Type of Diploma/ Degree	Major Field of Study
College or University						☐	☐		
						☐	☐		
Technical or Vocational						☐	☐		
						☐	☐		
Other						☐	☐		
						☐	☐		

Previous Training

Identify previous experience and skills that relate to the program curriculum for which you desire credit.

Student Certification

I certify that all the above information is true and complete.

(Signature of Student) _____ (Printed Name of Student) _____ Date (mm/dd/yy) _____

PREVIOUS EDITIONS OF THIS FORM WILL NOT BE ACCEPTED

PS-010
REV 06/11

FOR SCHOOL USE ONLY

Entrance Test: _____
(Score)

_____
(Name and Version)

School Evaluation of Previous Education and Training

Instructions: List below the subjects of this program for which credit is given, the hours of credit granted, and the justification for which the credit is granted such as skills tests, years' experience, and transcript information.

Subject	Clock Hours of Credit	Justification of Credit

Credit / Price Adjustments

			Tuition	Other	Total
Original Program Length:	100 Cl. Hrs	Original Cost	$800.00	$200.00	$1,000.00
Less Credit Granted	_____ Cl. Hrs	Less Credit Granted	($_____)	($_____)	($_____)
Adjusted Program Length	_____ Cl. Hrs	Adjusted Cost	$_____	$_____	$_____

☐ I certify that all information provided by the student has been evaluated and that the student will not receive credit.

☐ I certify that all information provided by the student has been evaluated and that the student has been given credit for which he/she is entitled as identified herein.

_____ Stella Iyare _____ _____
(Signature of Authorized School Official) (Printed Name) Date (mm/dd/yy)

Student Acknowledgment ***Do not sign below unless the information above is complete and signed by the school official.***

I have discussed the above evaluation of my previous education and training with the authorized school official and acknowledge that:

☐ **I will** receive the above stated credit, or

☐ **I will <u>not</u>** receive credit.

_____ _____ _____
(Signature of Student) (Printed Name of Student) Date (mm/dd/yy)

Individuals may receive and review information that TWC collects about the individual by emailing to <u>open.records@twc.state.tx.us</u> or writing to TWC Open Records, 101 E. 15th St., Rm. 266, Austin, TX 78778-0001.

TEXAS WORKFORCE COMMISSION
Career Schools and Colleges
Receipt of Enrollment Policies

ACE TRAINING INSTITUTE
(Name of School)

Authority for Data Collection: *Texas Education Code, Section 132.055 & Texas Administrative Code, Section 807.193.*

Planned Use of the Data: To provide evidence of receipt of that information which is required by law to be provided the student prior to enrollment.

Instructions: This form is to be completed by the student prior to enrollment and the completed form maintained by the school in each student's file. A copy of the completed form will be given to the student. If additional clarification is needed, contact Career Schools and Colleges at (512) 936-3100.

This information is provided for the student's protection. Ensure each item of information is given to the student, fully explained and all questions answered prior to signing an enrollment agreement or contract.

The prospective student must acknowledge receipt by initialing in the space provided on the bottom of the first page and signing at the end of the form.

A:
I have received prior to enrollment:

☐ a copy of the school catalog and a program/course outline for the program(s) in which I wish to enroll.

☐ a schedule of the tuition, fees, and other charges.

☐ a copy of the cancellation and refund policy.

☐ the attendance, progress and grievance policies.

☐ rules of operation and conduct.

☐ regulations pertaining to incomplete grades.

☐ written and verbal explanations of the difference between a LOAN and a GRANT.
*(Complete this item only if the school participates in a loan or grant program.)

☐ an invitation to tour the school's facilities and inspect equipment related to my planned program of instruction. (As an enrolling student, you will be asked to sign and date a receipt on the day you receive your required tour of the school.)

☐ **notice of all policies related to program interruption prior to completion. If printed in the school catalog, the policies are on page(s):** 8-10

B:

☐ If the school awards credit hours, I understand that transferability of any credit hours earned at this school may be limited. I have also been provided a list of all known Texas institutions of higher learning and state technical institutes that will accept any or all of the credit hours earned at this school.

_____
(Student Initials)

C:

☐ I have furnished information disclosing my previous education, training, and work experiences. I understand this will be evaluated and may result in my program/course length being shortened and the cost being reduced.

☐ I further realize that any grievances not resolved by the school may be forwarded to the Texas Workforce Commission, Career Schools and Colleges, Room 226T, 101 East 15th Street, Austin, Texas 78778-0001, (512) 936-3100.

☐ A comparison of the cost to me for a similar course or program at other schools is available by contacting the Texas Workforce Commission, Career Schools and Colleges, Room 226T, 101 East 15th Street, Austin, Texas 78778-0001, (512) 936-3100.

☐ Employment in this career field ☐ ***(does)*** ☐ ***(does not)*** require state or national licensing, certification, or registration.

TEXAS HEALTH AND HUMAN SERVICES COMMISSION

(Name of State or National License, Certificate, or Registration, if required)

PROGRAM: Nurse Aide

REPORT YEAR: 2019-2020

NUMBER ENROLLED: 245

NUMBER OF GRADUATES: 153

COMPLETION RATE: 62.45 %

NUMBER OF GRADUATES EMPLOYED: 42
(Graduates that found a job related to training)

EMPLOYMENT RATE: 27.45 %

NUMBER OF GRADUATES PLACED: 0
(Graduates that found a job related to training, with the school's assistance)

PLACEMENT RATE: 0 %

NUMBER OF JOB OPENINGS FOR THE LAST 12 MONTHS: 1,564,300
(if data is available)

AVERAGE YEARLY STARTING SALARY: $13.23
(if data is available)

YEARLY STARTING SALARY RANGE: $27,510 (Low) – $35,683 (High)
(if data is available)

EXAM PASSAGE RATE: 67 %
(for programs that prepare for state licensing, certification, or registration exams)

(Additional information may be attached.)

D:

I understand that my certificate of completion and my transcript may be withheld if I have not fulfilled my financial obligations to this institution at the time of my graduation.

I certify that I have been provided all of the information above *prior to my enrollment.*

I understand that it is my responsibility to notify the school if I withdraw prior to completion.

I will receive a copy of this completed form and a copy of my enrollment agreement when signed.

(Signature of Student) — Date (mm/dd/yyyy)

(Signature of School Official providing the information) — Date (mm/dd/yyyy)

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