BLYTHEVILLE SCHOOL OF COSMETOLOGY

Where we specialize in beauty 100 E. Main St
Blytheville AR, 72315
870 838 1218

Welcome to BSC! You have made the right decision to further your future career.

PURPOSE: Request to take courses at the Blytheville School of Cosmetology (BSC). Course includes Hygiene and Sanitation, Hairdressing, Manicuring and Cosmetic Therapy.

ENROLLMENT AGREEMENT INSTRUCTIONS: Please read, complete, date and sign the application. Please be prepared to provide a copy of your driver's license, social security card, and High school diploma or GED. Once we have received your request of enrollment, we will instruct you on further instructions for enrollment, to start fulfilling your rewarding career as a professional.

What would you like to study? On what days are you available to attend for courses? Course Hours_____ Previous Hours: ☐ Cosmetology ☐ Manicuring Course Hours Previous Hours: ☐ Instructor Previous Hours: _ Course Hours ☐ Esthetician Course Hours Previous Hours: **GRADUATION REQUIREMENT:** By signing, you agree that in order to graduate from the program, and to receive a diploma, you must successfully complete the required number of clock hours as specified above, pass all written and practical examinations with a 75% average and satisfy all financial obligations to the school. The full payment of _____ will be required prior to graduation. Installment payment due date is each month until paid in full. How will your courses be paid? □ Cash ☐ State Program $\Box V.A$ **COMPLETE THIS STATEMENT:** I understand that I must complete the program by _____

school upon a determination of circumstances warranting such a waiver.

I will be required to pay \$20.00 per program hour and for the hours remaining after the completion date. The additional hourly fee may be waived only with the written consent of the

| Applicant Introduction Information: | | | |
|---|--|--|--|
| Last Name: First Name: | | | |
| Home Address: | | | |
| Phone Number: Email Address: | | | |
| Social Security Number: Date of Birth: | | | |
| Driver's License / State ID No.: ID's State: | | | |
| Applicant Background Information: | | | |
| What is your Gender? □ Male □ Female | | | |
| Are you a Citizen? Yes No Are you a legal resident? | | | |
| What is your ethnicity? $\ \square$ African-American $\ \square$ Caucasian $\ \square$ Hispanic $\ \square$ Other | | | |
| Applicant Educational and Occupational Background: | | | |
| What is your highest level of education? | | | |
| □High School □ GED □ Bachelors □Masters | | | |
| Are you currently employed? No Yes Where? | | | |
| Have you ever been convicted of a felony? \square No \square Yes | | | |

REFUND POLICY:

An applicant not accepting training by BSC should be entitled to a refund of payment, with exception of the enrollment fee.

If a student (or in the case of a student under age, his/her parent or guardian) cancels his/her enrollment and requests in writing his/her payment refunded, within/after three (3) business days of signing of an enrollment agreement or contract, all payments collected by the BSC, less the application, registration or enrollment fee shall be refunded. This is to be determined by the postmark on written notifications, or the date said information is delivered to the administrator or owner in person. This policy applies regardless of whether or not the student has actually started training.

For students who enroll in classes and receiving Title IV payments, the schedule for tuition adjustments is authorized (see Table 1):

| Percentage Time to Total | Amount of Total School | Tuition |
|--------------------------|------------------------|---------|
| Time of Course | Owned | |
| 0.01% to 4.9% | 20% | |
| 5% to 9.9% | 30% | |
| 10% to 14.9% | 40% | |
| 15% to 24.9% | 45% | |
| 25% to 49.9% | 70% | |
| 50% and over | 100% | |

^{*}TABLE 1: FOR PELL AND TITLE IV STUDENTS ONLY.

Enrollment time is defined as the time elapsed between the actual starting dates of the students last day of physical attendance in school. Any payments due by the applicant or student shall be refunded within thirty (30) days of formal cancellation by students, as defined previously or formal termination by BSC, which shall occur no more than thirty (30) days from the last day of physical attendance, or in the case of leave of absence, the documented date of return.

Students who terminate prior to course completion will be charged a **\$200** termination fee, plus the tuition unless other arrangements have been made in writing.

If BSC is permanently closed and no longer has offers instruction after a student's enrollment, the student shall be entitled to a pro-rated refund of tuition.

If a course is cancelled subsequent to a student's enrollment, BSC shall either provide a full refund of payment or provide services for completion of the course.

GROUNDS FOR TERMINATION: Student termination is the disciplinary action we do not want to utilize for our students. However, if it becomes necessary, the following are grounds for termination of a student from our school: Not making satisfactory progress in Theory Class, Practical Training or Attendance; Disregard for the school's rules and regulations; and failing to make tuition payments to school.

ACKNOWLEDGEMENT AND SIGNATURES: This contract contains the entire agreement between the applicant and Blytheville School of Cosmetology, and no further modification or representation except herein expressed in writing will be recognized. By signing this contract you have acknowledge and agree to the content of this agreement, are satisfied with your completion of the blanks on the form, and have a copy for your records.

| Signature of Applicant: | Date: |
|----------------------------------|------------------|
| Signature of Parent or Guardian: | Date: |
| Signature of BSC Official: | Acceptance Date: |