## Registration Form

The tuition for the *DENTAL ASSISTING* course of study offered by Colorado Dental Assisting School, LLC is:

\$3,295

The tuition covers <u>all</u> costs for the course and includes a non-refundable registration fee of \$100. The course will run ten (10) consecutive weeks (not counting holidays), eight classroom hours per week for a total of eighty (80) classroom hours of instruction. This will include lecture material as well as clinical "hands on" training. There is also approximately 60 hours of home study. Your tuition includes all of the following:

- Use of textbook: "Modern Dental Assisting", Torres & Ehrlich; 10th.Ed (2011); Elsevier Publishing.
- Syllabus: "Concepts in Dental Assisting", Richard Erickson, DDS, 4th, Ed (2012); DCI Publishing.
- All training and visual aids, materials and dental supplies used throughout the course.
- Dental Assistant Radiology X-ray Certification for compliance with the State of Colorado.

- CPR Certification classes.
- Job Interview preparation and coaching.
- Free Job Placement assistance and referral service. We put the students on a list to give to hiring dentists.
- A free teeth whitening kit (\$100 value)
- A set of professional scrubs.
- Use of all dental equipment and instrumentation with actual "hands on" training during the course of study. There are NO hidden or additional expenses.

- Training in ALL aspects of dental assisting, including specialties.
- A Certificate in Dental Assisting, Dental Assistant pin, and a letter of recommendation outlining your training and experience will be awarded to students attaining a 70% or above grade average.
- All training is done by dental professionals in an actual practicing dental office, not a classroom.
- Optional Externship

The \$3,295 tuition may be paid using one of the five arrangements:

- 1) Cash or Check: Accept personal checks via payment in full five days prior to the first day of class
- 2) Credit Cards: Accept all credit cards via payment in full prior to the first day of class
- 3) In-house Payment Plan: Accept \$100 registration fee (refundable up to 30 days before session).
  - Three installments: \$625 (1st day of class), \$1,325 (14th day of class), and \$1,245 (28th day of class)
- 4) Long-term Financing: Accept and arrange for outside financing for those that are approved from Care Credit or Enhance Patient Financing, or Lending Tree.
- 5) MyCAA: Scholarship for eligible military spouses.

This course is Approved and Regulated by the Colorado Department of Higher Education,
Private Occupational School Board

## **6020 North Carefree Circle**

Colorado Springs, CO 80922
Please completely fill out the information below and send in with your selected payment option. Thank You!

Stu	ident Name :				
Ad	dress:				
City	у	_State	Zip		
Ph	one Number:			_	
Stu	ident's Email:			_	
Ant	ticipated Start Date:				
l w	ish to register for the upcoming class and h	ave selecte	d one of the foll	lowing payment options:	(Select One)
	By Cash or Check (enclosed). Full Tuition Credit/Debit Card (we accept Visa, Maste			Tuition for \$3,295.	
	Credit Card #			Exp Date:	
	Name on Card or Care Credit Acct Card (Acct) Billing Street Add:				
	Card (Acct) Billing Street Add: 3 digit			ZIP	<del></del>
	Security Code:Cardholde	r Signature:			
	In-house Payment Plan: Pay \$100 regist Registration fee is refundable up to 30 day Days before class), \$1,325 (14th day of class) Coordinator on how to apply for an outside eligibility for the line of credit will be determassist in the application process are Lendi MyCAA: I'm interested in speaking with years.	ys before se ass), and \$1 plication req e line of cred nined based ngTree.com	ssion. Three instance instance instance in 1,245 (28th day juired): I'm intedit from one of the upon a 3rd part, EnhancedPat	stallments on the following of class). Mailed to About rested in speaking with the following three source assessment of mytientFinance.com, and Communications.	ing dates: \$625 (5 business ove Address. your Admissions ces. I understand that my credit. Three sources we'll careCredit.com.

## **Refunds and Cancellations**

- A graduation certificate, letter of recommendation, and pin will <u>only</u> be awarded to those students attaining a <u>70% or above grade average</u>. Those students whose grade average is below 70% will not receive a certificate and letter of recommendation.
- Cancellation date is based on when cancellation notice is received by the school.
- A full refund will be made of all deposits or payments if the student is not accepted.
- A full refund will be made of all deposits or payments if cancellation is made up to 30 days prior to the class starting date or up to 3 days after applying for the class. Students have a 3-day cancellation right to a full refund accept when student has started training.
- All but \$100 will be refunded if cancellations are made after 3 days after applying for the class.
- If cancellation is made after the first class but prior to the second class, all but \$489.50 will be refunded.(10% of tuition and registration fee)
- For cancellations during Classes 2 through 4, \$1,073.75 will be retained and any remaining balance will be refunded. (25% of tuition and registration fee)
- For cancellations for classes 5 through 6, \$2047.50 will be retained and any remaining balance will be refunded. (50% of Tuition and registration fee)
- For cancellations for classes 7 through 8, \$3021.25 will be retained and any remaining balance will be refunded. Any cancellations after this will be non-refundable (75% of Tuition and registration fee)
- If a student drops out of the program at any point, and decides to re-register for a future class, full tuition fee of \$3995 will be charged and no credit will be given to payments made for the previous class.
- Refund will be made within 30 days of termination or receipt of cancellation notice.
- A student can be dismissed, at the discretion of the Clinical Director, for misconduct, nonpayment of tuition, or failure to comply with the Student Conduct Policy.
- For any program or course that is postponed by the institution, the student will have the right to request a refund or continue on with the class with the updated schedule.

By signing below, I agree to all the terms for the course. I have read and understand the policies listed above an	ıd ın
the current course catalogue. I also acknowledge that I have received a copy of the registration form and a curre	ent
copy of the course 2016 catalogue, Volume 4.	

Signature	Date:		
In-State Agent Mindy Anderson Date: 2016			