ALBERTA STUDENT ENROLLMENT CONTRACT
PRIVATE VOCATIONAL SCHOOL PROGRAM

KDM Dental College International Inc.

☐ #520, 940 - 6 Avenue SW, Calgary, AB T2P 3T1 Phone: (403) 264-2744

☐ 2101 Bell Tower, 10104 -103 Avenue, Edmonton, AB T5J 0H8 Phone: (780)-423-6863

www.kdmdental.com

This contract is to be used only for programs licensed under the Alberta Private Vocational Schools Act. These programs appear on the Private Vocational School License posted in the institution.

Please ensure <u>all 9 areas (*) are filled out</u> on this page and <u>signature and date on back</u> in order to process your registration.

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* **Name of Applicant** *** Telephone** *** E-Mail Address**

*** Address of Applicant (Street address, city, province, postal code)**

Dental Assisting *Full-time*

Program Name **Mode of Delivery (full-time, part-time, on-line, correspondence)**

28 weeks including 4 week practicum

Length hrs/weeks *** Program Start Date** *** Program End Date**

$11,293.00 **Books $340.00 + Supplies $5,355.00** **$16,988.00**

Tuition fee (*including $150.00 non-refundable registration fee. This fee will not exceed $150.00)* **Other Fees** **Total Cost to Student**

It is important that you understand the following prior to signing this contract:

a) This program will be delivered as outlined on the attached page. The institution will provide you with information on the number of former students who found training-related employment.
b) Taking this program does not guarantee employment.
c) You should ask potential employers whether they would hire graduates of this program.
d) The method of payment of the tuition and other costs of this program.
e) A signed copy of this contract must be provided to you within 7 days of signing.
f) You should be provided with a written description of all the institution's policies that apply to students taking this program.
g) If you are under 16 years of age the institution must obtain written approval from the Director of Private Vocational Schools before you can take this program.
h) If any loans are made to you to take this program repayment is your responsibility.
i) Sections 16 to 25 of Private Vocational Schools Regulations are set out on the back of this contract.
j) The Director of Private Vocational Schools regularly requires institutions to report the number of graduates and the number of graduates that obtained employment. The signing of this contract represents your permission for the institution to give the Director your name and phone number and your employer's name and phone number.

****** I have read and understand the contents of this application and contract of tuition**.** **_____ (student's initials) ****

All tuition and supply fees must be paid in full prior to taking final examinations.

***_____** ***_____**

(Signature of Student) **(Date)**

The licensee agrees to deliver the above referenced program in accordance with the Private Vocational Schools Act and Regulations.

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(Signature of the representative who has authority to sign this contract on behalf of the institution) (Date)