



**The Practical and Pastry Series
At
Classic Cooking Academy**

ENROLLMENT AGREEMENT

10411 East McDowell Mountain Ranch Road
Scottsdale, AZ 85255
Phone: (480) 502-0177
Fax: (480) 502-0178
www.ccacademy.edu
info@ccacademy.edu

Student Initial: _____

☐ **PRACTICAL SERIES** ☐ **PASTRY SERIES**

START DATE: _____

START TIME: _____

Last Name First Middle

Street Address

City State Zip Code

Home Phone Work Phone

Email Address

Chef Jacket Size - Circle One*
 XS S M L XL XXL

Are you in good physical health? Yes No If no, please explain:

Can you lift and carry 30 pounds? Yes No If no, please explain:

Do you have any food allergies? Yes No If yes, please explain:

Do you have any dietary restrictions? Yes No If yes, please explain:

Name, Address, Phone # and Relationship of person to contact in case of emergency:

Please select your payment option for your program.

☐ **LUMP SUM** ☐ **PAYMENT PLAN**

***Chef Jackets MUST be purchased at the time of enrollment. There is no return/refund policy for jackets – we embroider all jacket orders with students’ names and our logo.**

Signature: _____ **Date:** _____

Return Completed Application via
Fax - **480.502.0178**
or
Email - **info@ccacademy.edu**

Student Initial: _____

PAYMENT PLAN CONFIRMATION SHEET

IMPORTANT: If you are committing to the lump sum payment option, disregard this page.

Payment Plan Costs:

- Practical Series:

Initial Deposit:	\$500
Enrollment Fee:	\$50
Chef's Jacket Fee	\$40
First Monthly Payment:	\$325
Second Monthly Payment:	\$325
Third Monthly Payment:	\$325
Fourth Monthly Payment:	\$325
Fifth Monthly Payment:	\$325
<u>Sixth Monthly Payment:</u>	<u>\$325</u>
Total Program Cost:	\$2,540

- Pastry Series:

Initial Deposit:	\$225
Enrollment Fee:	\$50
Chef's Jacket Fee:	\$40
First Monthly Payment:	\$325
Second Monthly Payment:	\$325
<u>Third Monthly Payment:</u>	<u>\$325</u>
Total Program Cost:	\$1,290

Each monthly payment is due on the 10th of each month. No interest is charged on either payment plan. After the final class of either program, any outstanding balance will limit the student from receiving their respective Certificate of Completion.

Please select your method of payment for your payment plan:

☐ CASH ☐ CHECK ☐ DEBIT CARD ☐ CREDIT CARD

I agree to adhere to the Payment Plan's fees, schedules, and guidelines of my respective cooking program. I agree to be responsible for any missed payments.

Signature: _____ Date: _____

Student Initial: _____

PROGRAM INFORMATION:

	Practical Series	Pastry Series
Program Length:	24 weeks 60 clock hours	12 weeks 30 clock hours

COSTS:

	Practical Series	Pastry Series
Tuition:	\$2,450.00	\$1,200.00
Enrollment Fee:	\$50.00	\$50.00
Chef's Jacket:	\$40.00	\$40.00
Total Program Cost:	\$2,540.00	\$1,290.00

CANCELLATION AND REFUND POLICIES

Denial: An applicant denied by the school is entitled to a refund of all monies paid.

Three-Day Cancellation: An applicant who provides written notice of cancellation within three (3) days (excluding Saturday, Sunday, and federal and state holidays) of signing an enrollment agreement is entitled to a refund of all monies paid. The school shall provide the 100% refund within thirty (30) days of receiving the notice of cancellation.

Other Cancellations: An applicant requesting cancellation more than three (3) days after signing an enrollment agreement and making an initial payment, but prior to entering the school, is entitled to a refund of all monies paid. (Minus an enrollment fee of \$50.00).

Refund after the commencement of classes:

- I. Procedure for withdrawal/withdrawal date:
 - a. A student choosing to withdraw from the school after the commencement of classes is required to provide written notice to the Director of the school. The notice should indicate the expected last date of attendance and should be signed and dated by the student.
 - b. A student will be determined to be withdrawn from the school if the student has failed to attend three consecutive class days.
 - c. All refunds will be issued within thirty (30) days of the determined date of the student withdrawal date.

Student Initial: _____

- II. Tuition charges/refunds:
- Prior to the beginning of classes, the student is entitled to a refund of 100% of the tuition (less the \$50.00 enrollment fee).
 - After the first week of classes, the tuition refund (minus the \$50 enrollment fee) shall be determined as follows:

% of the clock hours attempted:	Tuition refund amount:
10% or less	90%
More than 10% and less than or equal to 20%	80%
More than 20% and less than or equal to 30%	70%
More than 30% and less than or equal to 40%	60%
More than 40% and less than or equal to 50%	50%
More than 50%	No refund is required

- III. Chef's jacket refund:
- Once purchased, students cannot return or request a refund for their specially embroidered chef's jacket.

The percentage of the clock hours accomplished is determined by dividing the total number of clock hours elapsed from the student's start date through the student's last day of attendance by the total number of clock hours in the program.

Refunds will be issued within thirty (30) days of the date of student withdrawal notification or date of school determination (withdrawal due to absences or other criteria as specified above within thirty (30) days of the date the student was scheduled to return from the LOA and did not return.

HOLDER IN DUE COURSE STATEMENT:

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 amounts paid by debtor (A.R.S. §47-3302).

THE STUDENT UNDERSTANDS:

1. The School does not accept credit for previous education, training, work experience (experimental learning), or CLEP.
2. The School reserves the right to reschedule the program start date when the number of students is too small.
3. The School will not be responsible for any statement of policy or procedure that does not appear in the School catalog.
4. The School reserves the right to discontinue the student's training for unsatisfactory progress, nonpayment of tuition or failure to abide by School rules.
5. It should not be assumed that any programs described in the School catalog could be transferred to another institution. Any decision on the comparability, appropriateness and applicability of the program hours and whether they should be accepted is the decision of the receiving institution.
6. This document does not constitute a binding agreement until accepted in writing by all parties.

Signature: _____

Date: _____

STUDENT ACKNOWLEDGEMENTS:

1. I hereby acknowledge receipt of Classic Cooking Academy's catalog date _____, which contains information describing programs offered, and equipment/supplies provided. The Classic Cooking Academy's catalog is included as a part of this enrollment agreement, and I acknowledge that I have received a copy of this catalog.
2. Also, I have carefully read and received an exact copy of this enrollment agreement.
3. I understand that the School may terminate my enrollment if I fail to comply with attendance and financial requirement or if I disrupt the normal activities of the School. While enrolled in the School, I understand that that my financial obligation to the school must be paid in full before a certificate may be awarded.
4. I also understand that this institution does not guarantee job placement to graduates upon program/course completion or upon graduation.

Signature: _____

Date: _____

Student Initial: _____

CONTRACT ACCEPTANCE:

I, the undersigned, have read and understand this agreement and acknowledge receipt of a copy. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreements and may not be modified without the written agreement of the student and the School Official. I also understand that if I default upon this agreement I will be responsible for payment of any collection fees or attorney fees incurred by Classic Cooking Academy.

My signature below signifies that I have read and understand all aspects of this agreement and do recognize my legal responsibilities in regard to this contract.

Signed this ____ day of _____.

Signature of Student:

Date:

Signature of Guardian:

Date:

Signature of School Official:

Date:

Student Initial: _____