



PACIFIC STATES UNIVERSITY

1516 S. Western Avenue, Los Angeles, CA 90006

Tel: (323) 731-2383 Fax (323) 731-7276 Toll Free (888) 200-0383

STUDENT ENROLLMENT AGREEMENT Distance Learning Program

Master of Business Administration Concentration:	Social Security # Driver's License #	Passport # I-94 #	Student #
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Please indicate this Quarter: Fall Winter Spring Summer Year: _____

Mr. Ms. Family (Last) Name _____ First Name _____ Middle Name _____

Street Address _____ City _____ State _____ Zip Code _____ Tel. () _____

Country of Citizenship _____ Country of Birth _____ Date of Birth: Month _____ Day _____ Year _____

e-mail Address (REQUIRED): _____

In Case of Emergency Please Contact:
(Name and Address)

Course No	Course Description	Office Only	Day	Hours	Room	Units	Instructor
TOTAL							

Graduate this Quarter? Yes No Completed Units to Date: _____

My signature below certifies that I have read, understand, and agree to all the terms, conditions, and explanations stated in this Student Enrollment Agreement. This includes but is not limited to the Student's Right to Withdraw and Tuition Refund Policy, the Buyer's Right to Cancel Policy, the Student Tuition Recovery Fund Policy (STRF), the Loan Responsibilities, and the Bureau for Private Postsecondary and Vocational Education reference for complaints, questions, or problems. Further, I agree that this will be a legally binding agreement when signed by me and accepted by the University.

Student's Signature: _____ Date _____

I certify that Pacific States University has met the disclosure requirements of California Education Code 94312 of The New Private Postsecondary Vocational Education Reform Act of 1998.

PSU Enrollment Approved by: (Name and Title) _____ Date _____

STUDENT'S RIGHT TO WITHDRAW AND TUITION REFUND POLICY

PSU'S refund policy has been established so that the student who withdraws from class shares in the cost incurred. Students who register and withdraw before the first class will be refunded the entire tuition minus US\$100. In the event that a student does not complete a course, tuition refund less the Non-Refundables will be made according to the following schedule:

<u>Withdrawal During Quarter</u>	<u>Refund</u>
1 st week of the Quarter	100%
2 nd week of the Quarter	90%
3 rd week of the Quarter	80%
4 th week of the Quarter	70%
5 th week of the Quarter	60%
6 th week of the Quarter	50%
7 th week of the Quarter	45%
After 7 th week of the Quarter	0

NO REFUND WILL BE ISSUED UNLESS THE STUDENT ACCOUNT HAS A CREDIT BALANCE. Refunds will be processed within ten (10) working days from receipt of the student's request to the Finance Office.

➤ FOR OFFICE USE ONLY ◀

Total Units _____ @ _____	US\$ _____
Facility & Equipment Fees	_____
Graduation Fee	_____
Other (Specify _____)	_____
Registration Fee (Non-Refundable)	_____
Late Registration (Non-Refundable)	_____
STRF (One Time and Non-Refundable)	_____
Application Fee (Non-Refundable)	_____
Evaluation Fee (Non-Refundable)	_____
TOTAL THIS QUARTER	US\$ _____
Balance Past Due	_____
TOTAL AMOUNT DUE	US\$ _____
Amount Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Check/Money Order	_____
<input type="checkbox"/> Visa/Master Card	_____
Receipt # _____ Date _____	_____
TOTAL BALANCE DUE	US\$ _____
Due Date: _____	_____
FINANCIAL APPROVAL BY: _____	

If you have any complaints, questions, or problems which you cannot work out with the school, write or call:

Bureau for Private Postsecondary and Vocational Education
400 "R" Street, Suite 5000, Sacramento, CA, 95814-6200, (916)445-3427

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BUYER'S RIGHT TO CANCEL POLICY

To cancel the Student Enrollment Agreement, students must submit their requests addressed to the Registrar, Pacific States University, 1516 S. Western Avenue, Los Angeles, CA 90006. Students may cancel this Agreement and receive a refund based upon the Student's Right to Withdraw and Tuition Refund Policy as stated on page 1 of this Student Enrollment Agreement.

STUDENT TUITION RECOVERY FUND (STRF) POLICY (California Residents Only)

The Student Tuition Recovery Fund (STRF) was established by the California Legislature to protect any California resident who attends a private postsecondary institution from losing money if the student has prepaid tuition and suffered a financial loss a result of the school's closing, failure to live up to its enrollment, or refusal to pay a court judgement.

To be eligible for STRF reimbursement, the student must be a "California Resident" and reside in California at the time the enrollment agreement is signed or when the student receives lessons at a California mailing address from an approved institution offering correspondence instruction. Students who are temporarily residing in California for the sole purpose of pursuing an education, specifically those who hold student visas, are not considered California residents.

To qualify for STRF reimbursement, the student must file an STRF application within one year of receiving notice from the Bureau for Postsecondary and Vocational Education that the school is closed. If the student does not receive notice from the Bureau, the student has four years from the date of closure to file an STRF application. If a judgement is obtained, the student must file an STRF application within two years of the final judgement.

It is important that students keep copies of the enrollment form, financial aid papers, receipts, and other information that documents the monies paid to the school. Questions regarding the STRF may be directed to the Bureau for Private Postsecondary Education and Vocational Education, 400 "R" Street, Suite 5000, Sacramento, CA, 95814-6200.

LOAN RESPONSIBILITIES

Any agency or organization which grants loans will indicate the terms and amount of that loan.

YOU ARE RESPONSIBLE FOR THIS AMOUNT. IF YOU GET A STUDENT LOAN, YOU ARE RESPONSIBLE FOR REPAYING THE LOAN AMOUNT PLUS ANY INTEREST.

Internet: <http://www.psuca.edu>

email: admission@psuca.edu