

# ENROLLMENT AGREEMENT

## CREIGHTON UNIVERSITY

2500 California Plaza

Omaha, NE 68178

402.280.2000

402.280.2045 Fax

nursing.creighton.edu

Student Name: \_\_\_\_\_

### Present Address:

\_\_\_\_\_  
\_\_\_\_\_

### Permanent Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone (home): \_\_\_\_\_

(work) \_\_\_\_\_

(cell) \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Creighton NetID: \_\_\_\_\_

### **PROGRAM INFORMATION:**

Program: Accelerated Nursing Curriculum (ANC)

*August Cohort:* August 16, 2021 – August 12, 2022 (Conferral date: August 20, 2022)

*January Cohort:* January 10, 2022 – December 10, 2022 (Conferral date: December 10, 2022)

Program Length: 12 months (58 credit hours)

### **TUITION:**

The total cost for the ANC program:

Tuition:	\$54,072
Administration/Registration Fee:	\$ 4,659*
Books/Supplies:	\$ 1,500**
Uniform/Stethoscope	\$ 450
Background Check/Drug Screen	\$ 166
Total Program Costs:	<b>\$60,847</b>

\*University Fee (\$2859) and Academic Program Fee (\$1800)

\*\*The College of Nursing allows students to purchase their textbooks in any medium (hardcopy or digital). This is a median price of the required textbooks for the program. Students purchasing an increased amount of hardcopy textbooks should expect to pay higher than this amount.

## **TUITION PAYMENTS:**

1. Tuition deposit of **\$350.00** is due within 14 days of your acceptance into the program.  
*The deposit will be applied to the first semester's tuition.*
2. Three-Day Cancellation: An applicant who provides written notice of cancellation within three days (excluding Saturday, Sunday and federal and state holidays) of paying the tuition deposit is entitled to a refund of all monies paid. No later than 30 days of receiving the notice of cancellation, the school shall provide the 100% refund.

### **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 the debtor (FTC Rule effective 5-14-76).

Students withdrawing will be charged tuition and recurring fees on the following basis<sup>1</sup>.

### Refund Policy (8 week courses)

<b>Withdrawal Date in Term</b>	<b>Refund Percentage</b>
4 <sup>th</sup> calendar day of term	100%
7 <sup>th</sup> calendar day of term	60%
10 <sup>th</sup> calendar day of term	20%
After 10 <sup>th</sup> calendar day of term	0%

### Refund Policy (3 week courses)

<b>Withdrawal Date in Term</b>	<b>Refund Percentage</b>
2 <sup>nd</sup> calendar day of term	100%
4 <sup>th</sup> calendar day of term	60%
After 4 <sup>th</sup> calendar day of term	0%

### Refund Policy (2 week courses)

<b>Withdrawal Date in Term</b>	<b>Refund Percentage</b>
1 <sup>st</sup> calendar day of term	100%
After 1 <sup>st</sup> calendar day of term	0%

<sup>1</sup>Nonrecurring fees, the application fee, the University fee, and penalty fees will be charged in full, regardless of the period of attendance.

A late payment fee will be added to charges assessed at registration that remain unpaid after the period for registration. This fee is \$150 per month that the account remains unpaid. Students with questions regarding their financial responsibilities are invited to contact the Business Office to request an appointment for individual counseling.

Complete information regarding tuition, fees, financial aid, withdrawals/refunds, and late payment can be located at <http://catalog.creighton.edu/undergraduate/tuition-fees/>

## **STUDENT UNDERSTANDS:**

1. The College does not accept credit for previous work experience or CLEP as pre-requisite to admission into the accelerated nursing program or as substitute for any required accelerated nursing courses.
2. The College does not guarantee job placement to graduates upon program/course completion or upon graduation.
3. The College reserves the right to reschedule the program start date when the number of students scheduled is too small.
4. The College will not be responsible for any statement of policy or procedure that does not appear in the University catalog or the BSN Student Handbook.
5. The College reserves the right to discontinue the student's education for unsatisfactory progress, nonpayment of tuition, or failure to abide by University/College rules.
6. It should not be assumed that any programs described in the University catalog could be transferred to another institution. The College does not guarantee the transferability of credits to another college, university or institution. Any decision on the comparability, appropriateness and applicability of credits and whether they should be accepted is the decision of the receiving institution.
7. This document does not constitute a binding agreement until accepted in writing by all parties.

## **STUDENT ACKNOWLEDGEMENTS:**

1. I hereby acknowledge that I have received the URL for the University's undergraduate catalog (<http://catalog.creighton.edu/undergraduate/>) which contains general University information as well as information regarding the College of Nursing. Admitted students must meet the [Conditions of Enrollment](#) outlined in the Creighton Undergraduate Catalog, including: (a) the successful completion of a criminal background check investigation; (b) submission of a passing drug screening; and (c) a submitted and approved Safety & Technical Standards Form.

\_\_\_\_\_ Student initials

2. I hereby acknowledge that I have received the URL for the College of Nursing's BSN Student Handbook (<https://nursing.creighton.edu/academics/student-handbooks>).

\_\_\_\_\_ Student initials

3. I understand that the University/College may terminate my enrollment if I fail to comply with attendance, academic and financial requirement, or if I disrupt the normal activities of the University/College while enrolled. I understand that I must maintain Satisfactory Academic Progress as described in the University catalog (<http://www.creighton.edu/financialaid/financialaidresources/>) and that my financial obligation to the University must be paid in full before a degree may be awarded.

\_\_\_\_\_ Student initials

**CONTRACT ACCEPTANCE:**

I, the undersigned, have read and understand this agreement. 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 Creighton University.

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 \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of School Official

\_\_\_\_\_  
Date