



# COURSE TUITION AGREEMENT

## Online NLP Certification Course

**Student Name:** \_\_\_\_\_  
(First) (Middle) (Last)

**Student ID#:** \_\_\_\_\_ **Enrollment Term:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**I. NLP Certification Course and Fees:** This agreement is for the **Online NLP Certification Course**. The student is responsible for acquiring the textbook, Ready, R. and Burton, K. (2004). *Neuro-linguistic Programming for Dummies*. John Wiley and Sons Ltd. Chinchester, West Sussex, England, to complete each course. Such textbook may be purchased from local or online bookstores for an average price of \$15.00 (US currency).

BREAKDOWN OF TUITION AND FEES (COURSE)	
Tuition Per Course*	Amount (US\$)
Training Fee	995.00
Certification Fee	100.00
<b>Administrative Fees per Course</b>	<b>Amount</b>
Application Fee	50.00
Records Processing Fee	75.00
Registration Fee (REG)	45.00
Technology Fee (TECH)	30.00
<b>TOTAL COURSE TUITION</b>	<b>\$1,295.00</b>

\_\_\_\_\_ \$ \_\_\_\_\_

KonaU Representative: \_\_\_\_\_  
(Training Fee & Total Course Tuition)

\_\_\_\_\_ \$ \_\_\_\_\_

**\*Tuition may be reduced due to scholarship or discretionary discount.**

**II. Payment Methods:** Payment must be in US currency. Please select payment method and contact the Bursar's Office for payment details as applicable:

Check  Cash  Credit Card, Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  Other \_\_\_\_\_

Security Code: \_\_\_\_\_

**III. Special Offer:**

\_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_ KonaU Rep: \_\_\_\_\_

**IV. Refund and Cancellation Policy:** When a student applies to Kona University, his/her application is reviewed and upon approval the student is notified of acceptance to the institution.

In the event that the student decides not to participate in the program, a request for withdrawal must be submitted in any manner by, phone call, email, fax, or postal mail. If the learner provides a written notice of intent to withdraw, it must be submitted to the following address: Records Office, Kona University, 75-6099 Kuakini Hwy, Kailua-Kona, HI 96740. This can be done by hand or mail delivery. The written notice of withdrawal, if sent by mail, is effective based on the postmark date, properly addressed with sufficient postage. The Registration Fee (Application and Records Processing) of \$125 is non-refundable, if the student cancels after five (5) business days from initial payment being received.

Below is the breakdown for the tuition refund for the four (4) week NLP program for students who withdraw once the course has begun. Students pay upon registration per term. Kona University's policy is fair and equitable, and no exceptions to the policy will be made. Please allow thirty (30) days for processing of your refund. **Note: No refund requests will be considered unless the student's account is current.**



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**Once the term has started, there is no refund for any FEES paid (including Technology and Registration).** Kona University may give special consideration to a learner’s request for cancellation beyond the minimum DETC refund policy in a case of learner illness or accident, death in family, or other circumstances beyond the learner’s control.

1 <sup>st</sup> Week .....	70%
2 <sup>nd</sup> Week.....	40%
3 <sup>rd</sup> Week.....	20%
4 <sup>th</sup> Week.....	0%

**V. Student’s Right to Cancel:** A student has the right to cancel the agreement for a course of instruction until midnight of the fifth business day after signing this Tuition Agreement and making payment. Students who cancel within five (5) business days after the date payment is received are entitled to a refund of all money paid to the institution. If the Tuition Agreement is cancelled after midnight of the fifth business day on which the learner submitted the Tuition Agreement, the Registration Fee (Application and Records Processing) of \$125 is non-refundable. The University will refund the learner any money paid 30 days after the notice of cancellation is received as per the refund and Cancellation Policy. Cancellation may be submitted in any manner, phone call, email, fax, or postal mail. If the student provides a written notice of cancellation, it must be submitted to the following address: Records Office, Kona University, 75-6099 Kuakini Hwy, Kailua-Kona, HI 96740. This can be done by hand or mail delivery. The written notice of cancellation, if sent by mail, is effective based on the postmark date, properly addressed with sufficient postage.

**VI. Maximum time allotted for completion of this program:** 4 weeks. If a student has been placed under University academic suspension or cannot finish the course due to extenuating circumstances he/she must submit an “Application for Readmission Form”. 2 weeks prior to the beginning of the term in which the student chooses to register. A fee of \$75.00 may be required if a student wishes to file an extension or re-enroll.

**VII. Grievance Policy:** All grievances/complaints must be delivered in written correspondence and presented to the Academic Review Committee. Such correspondence should be addressed to: Attn: Chair, Academic Review Committee, Kona University, 75-6099 Kuakini Highway Kailua-Kona, HI 96740.

**Note: Enrollment is contingent upon receipt of student’s application and the student meeting all admissions requirements.**

**My signature below certifies that:** 1) I have been given reasonable time to read and understand it and that I have a clear understanding of Kona University’s cancellation and refund policies (see website for an example of how it applies); 2) I have a clear understanding of a description of the course or educational service including all material facts concerning the school and the program or course of instruction which are likely to affect my decision to apply and enroll; 3) I understand my rights and responsibilities as a student (please refer to the website Admissions Section: FERPA, Family Education Rights and Privacy Act, and Grades and Academic Honesty); and 4) I understand that this is a legal and binding contract. I understand that I will receive a copy of this agreement after it is reviewed and accepted by Kona University.

Signature of Student\_\_\_\_\_ Date\_\_\_\_\_ (day/month/yr)

<b>Office Use Only:</b>		_____ <b>TAFORM</b>
		<b>DATE</b>
<b>Date Received:</b> _____	<b>Enrollment Advisor:</b> _____	
<b>Date Sent to Bursar:</b> _____	<b>Enrollment Advisor:</b> _____	