TOTAL CHARGES: $ _____

THE TOTAL AMOUNT FOR ALL FEES, CHARGES, AND SERVICES THE STUDENT IS OBLIGATED TO PAY FOR THE COURSE OR EDUCATIONAL SERVICE IS: $ _____.

Student initials _____

H. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution's cancellation and refund policies have been clearly explained to me. Furthermore, I have received a catalog, facility tour, program description sheet and completion and placement information (Sec.94854).

SIGNATURE: _____ DATE: _____

I. This agreement is not operative until the student makes an initial visit to the institution and receives a thorough tour, or attends the first class or session of instruction. The requirement is not applicable to correspondence or other distance learning programs.

_____ _____

Date of Tour Student Signature /Date

I certify that Shoreline Workforce Development Services has met the disclosure requirements of Education Code (Sec 94915) of the Private Postsecondary and Vocational Reform Act of 1998.

This agreement is accepted by _____

Signature of School Official / Date

NOTICE

ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSE 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 HEREUNDER.