GNPEC Student Disclosure Form

| Na | me of School: |
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| Ad | dress of School: |
| | |
| 1. | Enrollment Agreement & Catalog |
| | I have read and received a copy of the enrollment agreement, or equivalent document, and the school catalog. I |
| | understand that the terms and conditions of these documents are not subject to amendment or modification by oral |
| | agreements. |
| | Student's Initials |
| 2. | School Outcomes |
| | I have read and received a copy of the school's self-reported, unaudited retention, graduation, and placement rates |
| | for the preceding year as well as the most recent Georgia licensure test results, if applicable, for the program I am |
| | entering. |
| | Student's Initials |
| 3. | <u>Employment</u> |
| | I understand that upon successful completion of my training program, this school will provide placement |
| | assistance. However, I understand that the school does not guarantee any graduate a job. I have not been |
| | guaranteed employment to earn a specific salary range upon graduation. |
| | Student's Initials |
| 4. | Refund Policy |
| | I have reviewed the refund policy provided in the catalog and am aware that the institution attests to the fact that |
| | this policy meets the Minimum Standards set forth by the Georgia Nonpublic Postsecondary Education |
| | Commission. |
| | Student's Initials |
| 5. | Complaint Procedure |
| | I have reviewed the complaint procedure provided in the catalog and am aware that, after exhausting the |
| | institution's procedure, I have the right to appeal the institution's complaint determination to the Georgia |
| | Nonpublic Postsecondary Education Commission. |
| | Student's Initials |
| 6. | Authorization and Accreditation Status |
| | I understand that the institution in which I am enrolling has been issued a Certificate of Authorization by the |
| | Georgia Nonpublic Postsecondary Education Commission. This status indicates that the institution has met the |
| | Minimum Standards established by Georgia Code (§20-3-250.6). Although authorized, I understand that this |
| | institution is not accredited by a U.Sbased accrediting association recognized by the United States Secretary of |
| | Education; therefore, I am not eligible for Federal Student Aid. Additionally, as is the case with all postsecondary |
| | institutions, both accredited and unaccredited, there is no guarantee that my credits will transfer to another |
| | institution. |
| | Student's Initials |
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| Stu | dent's Signature:Date: |
| Scl | ool Representative's Signature:Date: |
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| *St | udent must receive a copy of this form, and a copy must be kept in the student's file. |

October 2017