

Golden Hyde School
1168 San Gabriel Blvd. #J, Rosemead, CA 91770
TEL: 626-571-0751 FAX: 626-571-0873

ENROLLMENT FORM

STUDENT INFORMATION

| | | | |
|--|----------|----------------|----------|
| (FIRST) | (MIDDLE) | (LAST) | |
| NAME | | | AKA |
| ADDRESS | | | |
| CITY | | STATE | ZIP CODE |
| PHONE | | BUSINESS PHONE | |
| COMPANY NAME | | | |
| DRIVER'S LIC NO | | SSN# | |
| BIRTHDATE | | EMAIL | |
| HOW DID YOU HEAR ABOUT US? <input type="checkbox"/> FRIEND (NAME): _____ <input type="checkbox"/> NEWSPAPER <input type="checkbox"/> YELLOW PAGES <input type="checkbox"/> INTERNET <input type="checkbox"/> OTHER: _____ | | | |

COURSE DESCRIPTION - SCHOOL USE ONLY

| 52 - HOUR PRELICENSING | REGISTRATION DATE | COMPLETION DATE | FINAL EXAM | CERTIFICATE DATE |
|------------------------|-------------------|-----------------|------------|------------------|
| | | | | |
| LIFE & HEALTH | | | | |
| FIRE & CASUALTY | | | | |
| LIFE ONLY | | | | |
| OTHER | | | | |

PAYMENT RECORD - SCHOOL USE ONLY

| | AMOUNT PAID | DATE | PAYMENT METHOD |
|--------------|-------------|------|---------------------------------------|
| REGISTRATION | | | CK # _____ |
| TEXTBOOK | | | MC/VISA _____ |
| TOTAL | | | PAID IN FULL <input type="checkbox"/> |

| ADD'L PURCHASE(S) | AMOUNT PAID | DATE | PAYMENT METHOD |
|-------------------|-------------|------|---------------------------------------|
| EXAM SIMULATOR | | | CK # _____ |
| TEXTBOOK | | | MC/VISA _____ |
| OTHER: | | | PAID IN FULL <input type="checkbox"/> |

SCHOOL COMMENTS

| |
|--------------|
| RECEIVED ON: |
|--------------|

DISCLOSURE TO STUDENTS

We are registered with the State of California. Registration means we have met certain minimal standards imposed by the state registered schools on the basis of our written application to the state. Registration does not mean we have met all of the more extensive standards required by the state for schools that are approved to operate or licensed or that the state has verified the information we submitted with our registration form.

This institution does not participate in the Student Tuition Recovery Fund (STRF). Any questions or problems concerning this school which have not been satisfactorily answered or resolved by the school should be directed to the Department of Consumer Affairs, Bureau for Private Postsecondary Education, 400 R Street, Suite 5000, Sacramento, CA 95814, (909) 445-3427.

BUYER'S RIGHT TO CANCEL

The student has a right to cancel this enrollment agreement and obtain a refund. Students are advised that any notification or withdraw of cancellation and any request for refund must be made in writing. The written notice of cancellation need not take any particular form, if sent by mail, is effective when deposited in the mail properly addressed with postage prepaid, and address to Mr. Jimmy Hsieh, Director, Golden Hyde Real Estate Center, 1168 San Gabriel Blvd. #J, Rosemead, CA 91770.

REFUND INFORMATION

The student has a right to a full refund of all charges less the amount of \$10.00 for the registration or processing fee if he/she cancels this agreement prior to or on the first day of instruction. Students enrolled in a correspondence course shall have the right to cancel until midnight of the eighth business day after the first lesson was mailed.

The school will also refund money collected for sending to a third party on the student's behalf such as license or application fees. If the school cancels or discontinues a course or educational program, the school will make a full refund of all charges. Refund will be paid within 30 days of cancellation or withdrawal.

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. This form is legally binding when signed by the student and accepted by institution.

SIGNATURE OF STUDENT

DATE

I certify that **GOLDEN HYDE REAL ESTATE CENTER** has met the disclosure requirements of the California Education Code Section 94931 of the Private Postsecondary and Vocational Education Reform Act of 2002.

SIGNATURE AND TITLE OF SCHOOL OFFICIAL

DATE