

ALBERTA STUDENT ENROLMENT CONTRACT FOR LICENSED VOCATIONAL TRAINING

PART A: INSTITUTION INFORMATION

Legal Entity

Vicars School of Massage Therapy Ltd.

Operating Name

Vicars School of Massage Therapy - Calgary

Unit Number

Street Number

Street Name

101

200

Country Hills Landing NW

City

Province

Postal Code

Country

Calgary

Alberta

T3K 5P3

Canada

Phone Number

Website

E-Mail

1-866-491-0574

www.vicarsschool.com

registrar@vicarsschool.com

PART B: STUDENT INFORMATION

Last Name

First Name

Middle Name

Gender (Optional)

Wilcox

Lauren

Ila

Female

Unit Number

Street Number

Street Name

PO Box 2289

City

Province

Postal / ZIP Code

Country

Beaverlodge

AB

T0H 0C0

Canada

Home Phone Number

Mobile Phone Number

E-Mail

780-259-0165

liw_wilcox@hotmail.com

Date of Birth

Alberta Student Enrolment Number / ASN

6/24/1994

1062-0144-5

Former Surname (if applicable)

Also Known As (if applicable)

Aboriginal Status (Optional)

Legal Status (Optional)

International Student

No

PART C: PROGRAM INFORMATION

Program Name

Massage Therapy Diploma Program - Class J26-C1 (Monthly)

Program Start Date

Program End Date

Program Length

26 September 2024

28 June 2026

2200

Hours | 94

Weeks

Delivery Mode

If other, please provide a brief explanation

Full Time

Program Cost

Tuition Fees (incl. Registration Fee): \$ 25,000

Registration Fee: \$ 250

Books: \$ 1,147

Supplies / Kits: \$ 3,050

Other Fees
(specify):

Technology Fee \$ 600

Lab Fee \$ 1,000

\$

Total Program fees: \$ 30,797

Privacy Notice: Alberta Advanced Education is collecting your personal information pursuant to section 33(c) of the Freedom of Information and Protection of Privacy Act, R.S.A. 2000, c. F-25 for the purposes of monitoring this program and the operations of private career colleges; tracking student mobility in, and strategic planning of, Alberta's post-secondary education system; and conducting research surveys with graduates of licensed programs in accordance with the Private Vocational Training Act, R.S.A. 2000, c. P-24. For more information or if you have questions, please contact the Director of the Private Career Colleges Branch, Alberta Advanced Education, 10155 102 Street, Edmonton AB, T5J 4L5, 780-427-5609.

PART D: ACKNOWLEDGEMENT OF TERMS

Please visit <https://open.alberta.ca/publications/p24> to access the *Private Vocational Training Act* and the *Private Vocational Training Regulation*.

Please initial beside each statement to acknowledge that you agree to the following:


Institution / Program Information

I reviewed the Student Rights and Responsibilities section of the Private Career Colleges Branch's website located at <https://www.alberta.ca/student-rights-responsibilities.aspx>.

Initial Here


I acknowledge that the institution did not guarantee that completing this Program will lead to employment or specific wages/salary. (Section 22(1)(b) of the *Private Vocational Training Regulation*).

Initial Here


 I contacted potential employers and any relevant regulatory/professional bodies to determine if they will recognize this Program for employment and/or certification in a related field.

Initial Here


I received the Program outline, a written description of the Institution's rules and policies, and information about the most recent graduation and job placement rates for this Program.

Initial Here


I toured the Institution and viewed the facilities and equipment available to students.

Initial Here


I know how the Institution will deliver this Program (e.g. self-directed learning, online, traditional lecture).

Initial Here


I acknowledge that the Institution must provide me with a copy of this contract after I sign it.

Initial Here


Admission Requirements

I provided the Institution with the appropriate documentation to show that I meet the admission requirements for this Program.

Initial Here


Applicable if under 16 years of age: I confirm that the Institution has obtained written approval from the Director of the Private Career Colleges Branch for me to enrol in this Program. (Section 12(3) of the *Private Vocational Training Regulation*).

Initial Here

Withdrawals/Terminations

I am aware that the Institution must terminate my enrolment in this Program by providing me with written notice (Section 13(1) of the *Private Vocational Training Regulation*).

Initial Here


I understand that I must provide written notice to the Institution if I wish to withdraw from the Program and terminate this contract (Section 13(1) of the *Private Vocational Training Regulation*). Such notice must be provided in a manner that I can verify the date the notice was delivered to the Institution.

Initial Here



I understand that this contract is terminated on the date that the written notice is delivered (Section 13(3) of the *Private Vocational Training Regulation*).

Initial Here


I understand that I must notify my funding source of my withdrawal or the termination of this contract if I am receiving student financial assistance.

Initial Here


Fee Payments and Tuition Refunds

 I have reviewed the *Tuition Refunds* section of the Private Career Colleges branch's website located at <https://www.alberta.ca/tuition-refunds.aspx>.

Initial Here


I understand that the Institution may charge me a registration fee of up to \$500, which it must credit toward my unpaid tuition fees (Section 14 of the Private Vocational Training Regulation). The Institution may retain this fee if I do not attend the Program unless:

- I terminate this contract within four business days of signing it (Section 15 of the Private Vocational Training Regulation).
- The Institution terminates this contract before the Program begins (Section 16(2) (a) of the Private Vocational Training Regulation).
- The Program does not begin by the start date in Part C of this contract and I choose to terminate this contract as a result (Section 16(2)(b) of the Private Vocational Training Regulation).

Initial Here 

I understand that the school cannot require or accept payment of the registration fee until I have signed this student contract and cannot accept payment of any other tuition or any incidental fees before my Program begins (Section 14(2) of the Private Vocational Training Regulation).

Initial Here 

I understand that if this contract is terminated after the Program begins, the Institution is entitled to the payment of tuition fees as outlined in Section 17 of the Private Vocational Training Regulation, which is as follows:

- 25% of the total tuition fees as identified in Part C: Program Cost of this contract if 10% or less of the Program is provided
- 60% of the total tuition fees as identified in Part C: Program Cost of this contract if more than 10% but less than 50% of the Program is provided
- 100% if more than 50% of the Program is provided.

Initial Here 

I understand that if I paid more tuition than the Institution is entitled to under Section 17(1), the Institution must refund me the difference.

Initial Here 

I understand that any refund that the Institution is required to pay will be paid to the source of payment for my tuition fees (i.e. the student, Government, agency, or person other than the student) and/or to any outstanding student loan where applicable (Section 21 of the Private Vocational Training Regulation).

Initial Here 

I understand that the Institution may withhold my credential if I do not pay my fees in full at the time of graduation.

Initial Here 

Student Complaints

I have reviewed the Student Complaints section of the Private Career Colleges Branch's website located at <https://www.alberta.ca/student-complaints.aspx>.

Initial Here 

I will first address any concerns I have regarding the Program through the Institution's student complaint process.

Initial Here 

If my complaint is not resolved through the Institution's student complaint process, I have 6 months from my last date of attendance in the Program to contact the Private Career Colleges Branch, Alberta Advanced Education by visiting <https://privatecareercolleges.alberta.ca/>.

Initial Here 

Student Information

Upon graduation, I agree to provide the Institution with information regarding my employment status, and my employer's name and telephone number.

Initial Here 

I acknowledge having read the Privacy Notice relating to the collection of personal information by Alberta Advanced Education in Part C of this contract

Initial Here 

SIGNATURE

By signing this contract, I agree to the terms of this contract and I authorize Alberta Advanced Education to collect the information in Part A of this contract, my graduation and employment status, and my employer's name and contact information from the Institution and I consent to the Institution providing this information to Alberta Advanced Education for the purposes of reporting on graduation and job placement information for this Program; monitoring operations of private career colleges; tracking student mobility and strategic planning of Alberta's post-secondary education system; and for conducting satisfaction and outcomes research surveys with graduates of licensed programs offered by private career colleges.




Signature of Student

LAUREN WILCOX

Printed Name of Student

MAY 13/24

Date



Signature of Witness

Shane O'Neill

Printed Name of Witness

May 13th/2024

Date

By signing this contract, the Institution agrees to offer the Program as licensed in accordance with the Private Vocational Training Act and Regulation.



Signature of Authorized Representative

Corrina Cornforth

Printed Name of Authorized Representative

May 14, 2024

Date

This contract is to be used only for programs licensed under the *Private Vocational Training Act* and Regulation. These programs appear on the Private Vocational Training License posted in the Institution. A copy of this contract signed by both the student and the Institution's authorized representative must be provided to the student within 7 days of signing. Any changes made to this contract must be agreed to and initialed by both parties.

PART E: ADDITIONAL INFORMATION

In the Student Policy Manual, I have read and understood the school's policy on attendance, absences, and in-class participation.

Initial *[Signature]* Here

In the Student Policy Manual, I have read and understood the school's policy on how they accommodate disabilities.

Initial *[Signature]* Here

In the Vicars Student Code of Conduct, I have read and understood my rights and responsibilities as a student.

Initial *[Signature]* Here

I understand that all non-instructional fees and costs listed in this document (such as books, lab fees, and supplies) are subject to change.

Initial *[Signature]* Here

I understand that tuition for each year of the program is due in full on the first day of class that year unless I choose to pay according to the school's no-fee tuition instalment plan or can demonstrate an acceptable payment schedule agreement with a third-party student aid provider. I understand that if I choose to pay according to the instalment plan I must supply pre-authorized payments on the first day of class.

Initial *[Signature]* Here