



CISL ADULT PROGRAMS ENROLLMENT AGREEMENT (January 1, 2020- December 31, 2020)

THIS ENROLLMENT AGREEMENT IS REQUIRED BY THE STATE OF CALIFORNIA

PERSONAL INFORMATION

Exactly as it appears on your passport:

Name	<input type="checkbox"/> Mr.			
	<input type="checkbox"/> Ms. <i>Last</i> <i>First</i> <i>Middle</i>
Address (Permanent) <i>Apt/House</i>	 <i>Street</i> <i>City</i>
 <i>State or Province</i>	 <i>Zip code</i> <i>Country</i>
Email Address				
Telephone		Country of Citizenship		
Date of Birth <small>(e.g. January 20, 1982)</small>	Month:	Day:	Year:	Country of Birth
		City of Birth		
Emergency Contact Name		Telephone		Country
Relationship		Email Address		

How did you hear about CISL? _____

Are you transferring from another school? Yes No

If yes, name of current/previous school: _____ Contact Information: _____

For students applying for F-1 visas:

Will you need an I-20 form for a student visa?* Yes No *A student visa is required for all courses over 20 lessons per week. If you checked 'yes,' be sure to include a copy of your passport and your financial statement with your application.

Do you want CISL to send your I-20 by express mail?* Yes No

*Express mail delivery of documents is available upon request for \$60-\$125 depending on your location. This fee is not refundable.

PROGRAM INFORMATION AND COURSE SELECTION

CISL Location	<input type="checkbox"/> San Diego 636 Broadway, Suite 210 San Diego, CA 92101			Number of Weeks	
Start Date	Month:	Day:	Year:	End Date	Month: Day: Year:

Morning Courses - 20 lessons / 16.67 clock hours per week (9:00 a.m. - 12:40 p.m.)

- | | | | |
|--|-------------------------------|--|---|
| <input type="checkbox"/> Standard | Cambridge Assessment English: | <input type="checkbox"/> TOEFL Test Prep | <input type="checkbox"/> No Morning Courses |
| <input type="checkbox"/> Executive English | <input type="checkbox"/> PET | <input type="checkbox"/> TOEIC Test Prep | |
| <input type="checkbox"/> English for Engineers | <input type="checkbox"/> FCE | <input type="checkbox"/> IELTS Test Prep | |
| <input type="checkbox"/> Aviation English | <input type="checkbox"/> CAE | | |

Afternoon Electives* - 8 lessons / 6.67 clock hours per week (1:30 p.m. - 3:10 p.m.)

- | | | | |
|---|-----------------------------------|--|--|
| <input type="checkbox"/> Business English | <input type="checkbox"/> FCE p.m. | <input type="checkbox"/> English for Academic Purposes (EAP) | <input type="checkbox"/> No Afternoon Elective |
| <input type="checkbox"/> Conversational English | <input type="checkbox"/> CAE p.m. | | |

*All F-1 students enrolled in a 20-lesson course will be placed in the PLUS option. The PLUS option includes a weekly study hall and is required to maintain their visa status.

Supplemental Programs

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Academic Year Program | <input type="checkbox"/> Pathway Program | <input type="checkbox"/> Career English | <input type="checkbox"/> Family English |
|--|--|---|---|

Private Lessons (one lesson is 50 minutes)

How many private lessons do you want per week?

- 5 10 15 20 25 other: _____

Premier? yes no

Real-time Online? yes no

ARRIVAL & DEPARTURE INFORMATION

Date of Arrival	Month:	Day:	Year:	Time of Arrival	
Airline				Flight No.	

Would you like CISL to arrange a transfer service between the airport and your accommodation?

Yes: Individual Transfer from airport* Individual Transfer to airport* No airport transfer is requested

* For airport transfer pricing information, go to: cisl.edu/cisl-student-life/airport-transfers

ACCOMMODATION

Would you like us to arrange housing for you?* Yes No

* \$75 Non-refundable fee required

I would like: Homestay Student Residence Arrival date: _____ Departure date: _____

What type of room would you like? Shared Private

What type of bathroom would you like? Shared Private*

*The private bath option in homestay is for Executive English enrollments only

Name of Student Residence: First preference: _____ Second preference: _____

CISL will contact you to confirm the availability of the accommodation you have requested.

HOMESTAY PREFERENCES

Preferred meal plan Breakfast Only Breakfast and Dinner

Can you live with small children? Yes No

Can you live with cats? Yes No

Can you live with dogs? Yes No

Do you smoke? Yes No

Can you live with smokers? Yes No

Do you have any allergies? Yes No If yes, explain: _____

Do you take any specific medication that we should know about? _____

What are your hobbies? _____

What is your occupation? _____

Any special requests? _____

ACKNOWLEDGEMENT: Prior to signing this enrollment agreement, you must be given a Catalog and a School Performance Fact Sheet which you are encouraged to review prior to signing this agreement. These documents contain important policies and performance data for this institution. This institution is required to have you sign and date the information included in the School Performance Fact Sheet relating to completion rates, placement rates, license examination passage rates, salaries or wages, and the most recent three-year cohort default rate, if applicable, prior to signing this agreement.

I certify that I have received the Catalog, School Performance Fact Sheet, and information regarding completion rates, placement rates, license examination passage rates, salary or wage information, and the most recent three-year cohort default rate, if applicable, included in the School Performance Fact Sheet, and have signed, initialed, and dated the information provided in the School Performance Fact Sheet.

_____ Student Initials Date: _____

PROGRAM COSTS

- \$ _____ Tuition
- \$ _____ Registration Fee (non-refundable)
- \$ _____ California Student Tuition Recovery Fund Fee (non-refundable) (calculated at \$.00 per \$1000)
- \$ _____ Other Charges for _____
- \$ _____ Total charges for the current period of attendance
- \$ _____ Estimated total charges for the entire program
- \$ _____ Total charges you are required to pay on enrollment

AGREEMENT SIGNATURE

You have the right to cancel the enrollment agreement and obtain a refund of charges paid through attendance at the first class session (first day of classes), or the seventh day after enrollment (seven days from the date when enrollment agreement was signed), whichever is later.

The last date for cancellation is : ____ / ____ / ____ (MM/DD/YY)

This enrollment agreement is a legally binding contract when signed by the student and accepted by the school.

I understand that this is a legally binding contract. 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.

Agreement: This agreement is a legally binding instrument when signed by me and accepted by the school. I have read, understood, and agree to the terms and conditions, the refund and cancellation policy, schedule, prices, and starting dates. I confirm that I have sufficient funds to pay all of the necessary costs of my course, accommodation, and other necessities during my entire program at CISL. In the event that I become unconscious or incapacitated due to illness or injury while at the school or accommodation, I grant permission for the staff to take necessary measures for providing examination and treatment. I understand that I will be responsible for the expenses incurred for this emergency medical attention.

Any questions or concerns regarding entering the United States that have not been answered or resolved by the school, must be directed to my local consulate/embassy or U.S. Immigration and Customs Enforcement (ICE) (www.ice.gov).

Photo Release: Students agree to allow photos and videos taken during the program to be used for publicity purposes.

Medical Insurance Requirement: I understand that medical treatment in the United States is very expensive and that I have been advised to obtain medical insurance that is valid in the United States before traveling to this country.

Applicant Signature *(Required to process application)*

Parent/Guardian Signature *(Required if applicant is under 18 years of age)*

Name of Parent/Guardian (if applicable) _____
Date

Signature and Title of School Official Accepting _____
Enrollment Date

PAYMENT INFORMATION

I authorize CISL to charge a total payment of: \$ _____						
Payment Method	<input type="checkbox"/> Bank Wire Transfer <small>We will contact you with bank wire information.</small>		<input type="checkbox"/> Credit/Debit Card <i>Visa / MasterCard</i>		<input type="checkbox"/> Pay to Study	<input type="checkbox"/> Western Union
Credit Card No.	Card Holder Name	Expiration Date	CVC Code			
Billing Address for Credit Card						
Please note that the \$150 non-refundable registration fee is due with the application to confirm enrollment.			Credit card authorization signature required:			



Registration Fee

A non-refundable registration fee of \$150 is required for all courses.

Career English Program

\$250 is non-refundable if the student cancels or postpones the Career English program prior to its commencement and before a company placement has been made. The entire fee is non-refundable if the student cancels the Career English program after a company placement has been found or after it has started.

Academic Year Program

\$250 is non-refundable if the student cancels or postpones the program prior to its commencement. The entire fee is non-refundable if the student cancels the Academic Year program after the student has started classes at college.

Pathway Program

\$250 is non-refundable if the student cancels or postpones the program prior to its commencement and before the application has been submitted to the college/university. The entire fee is non-refundable after the application has been submitted to the college/university.

Student's Right to Cancel / Refund policy

You have the right to cancel the enrollment agreement and obtain a refund of charges paid through attendance at the first class session, or the seventh day after enrollment, whichever is later. A student wishing to cancel or withdraw from the school and receive a refund should send their notice of cancellation or withdrawal to the school's address or by email to the School Director.

1. If you cancel your course prior to the first day of class, you will receive a full refund of all tuition charges minus your \$150 registration fee or any other non-refundable fees (e.g. SEVIS, express mail).
2. If you cancel your course after the start date of your classes, you will obtain a refund of charges paid through attendance at the first class session, or the seventh day after enrollment, whichever is later.
3. If you cancel your course after the first four weeks and you stop your classes before you have completed 60% of your course, you will receive a refund for the unused portion of the tuition. A \$250 cancellation fee will apply.

4. All tuition refund calculations are based upon minimum units of one week. This means that a refund is only effective as of the first Monday of the period you are canceling. Here is an example: If you tell the school on a Wednesday that you want to cancel your course immediately, the cancellation will only be effective as of the next Monday.
5. In the case of private lessons, one week prior notice is required to cancel your lessons. Here is an example: If you tell the school on a Tuesday that you want to cancel your private lessons, the cancellation will only be effective as of the following Tuesday and you will be charged for all of your scheduled private lessons from the day that you cancel (Tuesday) until the day that your cancellation becomes effective (the next Tuesday).
6. If the school cancels or discontinues a course, the school will make a full refund of all tuition you have paid for that course.
7. If you change your course after it begins, there will be a \$250 change fee. This does not include additions or extensions.

All refunds will be made within 45 days of a student's cancellation or withdrawal request. We can only pay refunds to the person or company from whom the funds originated.

The school does not participate in the State of California Student Tuition Recovery Fund.

Accommodation Fee

The non-refundable accommodation placement fee is \$75. A \$250 accommodation deposit is due at the time of booking. This deposit will be applied to the final accommodation balance.

- A \$100 fee is applied to any accommodation changes made within 14 days of arrival.
- If you cancel your accommodation less than 30 days before your scheduled check in, your \$250 deposit will not be refunded.
- If you want to cancel your accommodations after check-in, a thirty-day advance notice is required. If you do not give a thirty-day advance notice, you must pay for the accommodations for those thirty days.

Airport Pickup Fees

If you requested airport pickup, the airport pickup fee is not refundable unless you cancel the airport pickup at least 10 days before your scheduled arrival.

Express Mail Fees

Express mail fees are not refundable.

Extension of Courses

If you extend your courses or accommodations, each extension shall be considered a new enrollment for purposes of this refund policy.

Payment of Refunds

Refunds will be paid within 45 calendar days of your request. We can only pay refunds to the person or company from whom the funds originated. To obtain a refund you must make a written request to the school.

NOTICE CONCERNING TRANSFERABILITY OF CREDIT AND CREDENTIALS EARNED AT OUR INSTITUTION:

The transferability of credit you earn at CISL is at the complete discretion of an institution to which you may seek to transfer. Acceptance of a CISL Certificate of Completion or Certificate of Attendance that you earn is also at the complete discretion of the institution to which you may seek to transfer. If the Certificate of Completion or Certificate of Attendance that you earn at this institution is not accepted at the institution to which you seek to transfer; you may be required to repeat some or all of your coursework at that institution. For this reason you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending CISL to determine if your Certificate of Completion or Certificate of Attendance will transfer.

BPPE

CISL is a private institution and is approved to operate by the California Bureau for Private Postsecondary Education (BPPE). Any question a student may have regarding the school brochure/catalog or this enrollment agreement that have not been satisfactorily answered by the institution may be directed to the BPPE at the following addresses:

Mailing Address:

Bureau for Private Postsecondary Education, P.O. Box 980818
West Sacramento, CA 95798- 0818
Phone: (916) 431-6959
Toll Free: (888) 370-7589
Website: www.bbpe.ca.gov
E-mail: bbpe@dca.ca.gov

A student or any member of the public may file a complaint about this institution with the Bureau for Private Postsecondary Education by calling (888) 370-7589 toll-free or by completing a complaint form, which can be obtained on the bureau's internet website www.bbpe.ca.gov

TITLE IV POLICY / NO STUDENT LOANS

CISL students are not eligible for Title IV funding. CISL does not offer student loans or financial aid. If you get a student loan, you are responsible for repaying the loan plus interest, less the amount of any refund.

If you default on a federal or state loan both the following may occur (1) The federal or state government or a loan guarantee agency may take action against you, including applying any income tax refund to which you may be entitled to reduce the balance owed on the loan. (2) You may not be eligible for any other federal student financial aid at another institution or other government financial assistance until the loan is repaid.

If you have received federal student financial aid funds, you are entitled to a refund of moneys not paid from federal student financial aid program funds.

STATE OF CALIFORNIA STUDENT TUITION RECOVERY FUND

The State of California established the Student Tuition Recovery Fund (STRF) to relieve or mitigate economic loss suffered by a student in an educational program at a qualifying institution, who is or was a California resident while enrolled, or was enrolled in a residency program, if the student enrolled in the institution, prepaid tuition, and suffered an economic loss. Unless relieved of the obligation to do so, you must pay the state-imposed assessment for the STRF, or it must be paid on your behalf, if you are a student in an educational program, who is a California resident, or are enrolled in a residency program, and prepay all or part of your tuition.

You are not eligible for protection from the STRF and you are not required to pay the STRF assessment, if you are not a California resident, or are not enrolled in a residency program.

It is important that you keep copies of your enrollment agreement, financial aid documents, receipts, or any other information that documents the amount paid to the school. Questions regarding the STRF may be directed to the Bureau for Private Postsecondary Education, 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833, (916) 431-6959 or (888) 370-7589.

To be eligible for STRF, you must be a California resident or are enrolled in a residency program, prepaid tuition, paid or deemed to have paid the STRF assessment, and suffered an economic loss as a result of any of the following:

1. The institution, a location of the institution, or an educational program offered by the institution was closed or discontinued, and you did not choose to participate in a teach-out plan approved by the Bureau or did not complete a chosen teach-out plan approved by the Bureau.
2. You were enrolled at an institution or a location of the institution within the 120 day period before the closure of the institution or location of the institution, or were enrolled in an educational program within the 120 day period before the program was discontinued.
3. You were enrolled at an institution or a location of the institution more than 120 days before the closure of the institution or location of the institution, in an educational program offered by the institution as to which the Bureau determined there was a significant decline in the quality or value of the program more than 120 days before closure.
4. The institution has been ordered to pay a refund by the Bureau but has failed to do so.
5. The institution has failed to pay or reimburse loan proceeds under a federal student loan program as required by law, or has failed to pay or reimburse proceeds received by the institution in excess of tuition and other costs.

6. You have been awarded restitution, a refund, or other monetary award by an arbitrator or court, based on a violation of this chapter by an institution or representative of an institution, but you have been unable to collect the award from the institution.

7. You sought legal counsel that resulted in the cancellation of one or more of your student loans and have an invoice for services rendered and evidence of the cancellation of the student loan or loans.

To qualify for STRF reimbursement, the application must be received within four (4) years from the date of the action or event that made the student eligible for recovery from STRF.

A student whose loan is revived by a loan holder or debt collector after a period of non-collection may, at any time, file a written application for recovery from STRF for the debt that would have otherwise been eligible for recovery. If it has been more than four (4) years since the action or event that made the student eligible, the student must have filed a written application for recovery within the original four (4) year period, unless the period has been extended by another act of law.

However, no claim can be paid to any student without a social security number or a taxpayer identification number.

Note: Authority cited: Sections 94803, 94877 and 94923, Education Code. Reference: Section 94923, 94924 and 94925, Education Code.

QUESTIONS

Any question you may have regarding this enrollment agreement that have not been satisfactorily answered by the institution may be directed to the Bureau for Private Postsecondary Education at 2535 Capitol Oaks Drive, Suite 400 Sacramento, CA 95833 www.bbpe.ca.gov toll-free telephone number (888) 370-7589 or by fax (916) 263-1897

COMPLAINTS

A student or any member of the public may file a complaint about this institution with the Bureau for Private Postsecondary Education by calling (888) 370-7589 toll-free or by completing a complaint form which can be obtained on the bureau's Internet Web site www.bbpe.ca.gov.