



**Admissions:** 6409 Congress Avenue, Boca Raton, FL 33487  
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**Financial Planning Education:** 400 East 84th Ave., Suite 200  
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**International:** 561-981-7300  
**Fax:** 888-564-6745 (Toll Free)

**Website:** www.kaplan.edu/fp  
**Email:** infofp@kaplan.edu

## 1 Fill In Enrollment Information

**To: Office of the Registrar**

Please enroll me in the course(s) that I have selected on this Enrollment Agreement. I understand the tuition price must be paid in full prior to the start of my course(s) and that required textbooks are not included in the tuition.

NAME: \_\_\_\_\_ CONTROL #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

(Country)

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ MOTHER'S MAIDEN NAME: \_\_\_\_\_

EDUCATION: (check one) \_\_\_ High School \_\_\_ Graduate Equivalent Month/Year of Graduation: \_\_\_\_\_

NAME OF HIGH SCHOOL OR ISSUING AGENCY: \_\_\_\_\_

ADDRESS OF HIGH SCHOOL OR AGENCY: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

(Country)

COLLEGE DEGREE?  Yes  No; If Yes,  Associate's  Bachelor's  Master's  Doctoral, and please provide:

NAME OF COLLEGE OR UNIVERSITY: \_\_\_\_\_

ADDRESS OF COLLEGE OR UNIVERSITY: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

(Country)

CURRENT EMPLOYER: \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

(Country)

Do you have any health problems or disabilities that might hinder your completion of any online education course(s)?

Yes  No; If Yes, please explain on a separate sheet and attach it to this agreement.

**The terms of this agreement are contained on both sides. Please read them both.**

## 2 Choose Your Course(s)

### COURSES

- FP 101 FUNDAMENTALS OF PERSONAL FINANCIAL PLANNING .....\$525.00
- FP 102 INSURANCE AND EMPLOYEE BENEFITS .....\$525.00
- FP 103 INVESTMENT PLANNING .....\$525.00
- FP 104 INCOME TAX PLANNING .....\$525.00
- FP 105 PLANNING FOR RETIREMENT .....\$525.00
- FP 106 ESTATE PLANNING .....\$525.00
- FP 107 ONLINE REVIEW COURSE.....\$625.00

Textbooks are not included in the cost of tuition and may be purchased through the Kaplan University online student store.

### TERMS AND CONDITIONS

**1. REFUNDS:** All monies will be refunded if the student cancels within five calendar days after midnight of the day on which the Enrollment Agreement was signed. Thereafter, Kaplan University is entitled to the full tuition. **2. FOREIGN STUDENTS:** Students in foreign countries or U.S. territories will assume payment of customs duties and any difference in exchange rate and additional postage. Payment in full is required. All instruction is conducted in English. **3. INSTRUCTION:** Kaplan University will supply all materials required with the exception of textbooks and calculator, which are the sole responsibility of the student. A faculty member will answer students' questions and assist the student with his or her studies while the student is enrolled in the program. **4. COURSE VERSION:** To ensure the currency and efficacy of the Certificate in Financial Planning curriculum, courses in the program may be periodically updated. Kaplan University's academic administration may close a version of a course following no less than 90 days notice to the student. Students being transferred to a new version of a course following such notice may be required to repeat coursework and may be required to purchase updated textbooks and/or course materials, if applicable. **5. TUITION:** Tuition is payable in full in U.S. funds, by check on a U.S. bank, credit card, debit card, or by money order. The student understands that he/she is solely responsible for accessing the Internet course(s) and for all fees related thereto including appropriate computer equipment and an Internet service provider. All tuition must be paid prior to beginning coursework. **6. COURSE START DATE:** The date students are deemed to have started their course(s) is when the five-day period for rescinding the contract has passed and the tuition has been paid in full. **7. TRANSFER COURSE(S) TO PROGRAM:** Successful completion of individual courses requires passage of the course examination in the same manner and at the same evaluation standard as individuals enrolled in the entire program; a maximum of two (2) such courses may be applied at a later date as partial completion of the Certificate in Financial Planning program, in accordance with the Transfer of Credit Policy. Students desiring to transfer to the Certificate in Financial Planning with such successfully completed individual courses shall receive full tuition credit for their prior coursework. **8. PROGRESS:** The student is allowed up to three (3) months to complete each course and up to six (6) months to complete the FP107 Online Review Course. Extension may be granted for good cause upon written request. **9. ENTRANCE:** Student admission is at the discretion of the Program Director. At a minimum, students must be 18 years of age and possess either a high school diploma or a GED.

## 3 Mail Payment With This Agreement

My tuition payment in the amount of \$\_\_\_\_\_ is enclosed.

I am paying by: (check one) \_\_\_ Check \_\_\_ Money Order \_\_\_ Credit Card \_\_\_ Bank Card

My credit/bank card number (if applicable) is: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

My signature (only if using a credit/bank card): \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Please Note: If you are using a bank debit card, please check with your bank regarding limitations.**

## 4 Read, Sign Your Name, Add Today's Date

I have read the terms and conditions contained in the Enrollment Agreement and understand that this agreement constitutes a binding contract upon acceptance by the school. NOTICE TO STUDENT (BUYER): (1) Do not sign this agreement before you read it or if it contains any blank space; (2) You are entitled to a completed copy of this Agreement; and if accepted, such a copy will be mailed to you; (3) Under the law you have the right to pay off, without penalty, in advance, the full amount due; (4) You may cancel this transaction at any time prior to midnight of the fifth (5th) calendar day after the date you sign this agreement. By signing this agreement, I hereby agree to its terms and conditions.

SIGNATURE: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

### FOR SCHOOL USE ONLY—DO NOT FILL IN

Date: \_\_\_\_\_ Student #: \_\_\_\_\_ Accepted by: \_\_\_\_\_

Admissions Advisor: \_\_\_\_\_ LS: \_\_\_\_\_