



PERSONAL INTEREST APPLICATION FORM

Dear Student,

Welcome to Institute NHC.

Please consult the 2010-2011 Student Handbook on our website (<http://www.nhcinstitute.com/admissions/requirements.aspx>). We invite you to read this handbook and keep it as a reference so that you can check it during the school year if needed. It has been updated to include the information requested by our past students and to clarify administration procedures.

Please be advised that in order for your registration to be complete, and for admission into the courses, **the following forms, included in this package, must be completed and returned to the office:**

1. Institute NHC Admission Form
2. Student Statement
3. Medical Forms
4. Payment and Cancellation Policy

These forms will be kept in strict confidentiality in your student file for the duration of your studies at our school.

If you require additional information, or wish to meet with an academic advisor, do not hesitate to contact the office.

Vivian Borrello, Barbara Ford - Office Administration

Danielle Skene - Office Manager

Suanne Stein Day - Accountant

Adam Fiore - Student Advisor

Chiara Borrello - Director

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STUDENT STATEMENT

NAME.....
(Please Print)

I have read and understood as well as agree to respect the Institute NHC Student Policy, Regulations and Code of Ethics.

I have read, and understand the Health and Safety Policy in the Student Handbook (page 13), including the cautions about deep processing and psychiatric medications.

I have read, understood and completed the Personal Medical Form.

I agree to inform Institute NHC of any changes in my personal medical history.

I understand the nature of the courses and activities given at the school and state that I am completely capable of pursuing them fully.

I participate in these activities in a spirit of apprenticeship and intellectual curiosity, without expecting that they will provide me with some kind of cure or healing. I hereby assume full responsibility for my participation in all courses and activities. This includes all reactions and effects that could result from my participation therein, and I exonerate the Institute NHC, its teachers, and facilitators from all responsibility for any reactions and effects.

I agree that I will not charge professional fees for services under the title of Natural Health Consultant, NHC™, until I have graduated with the NHC Diploma.

(Les Parties ont exigé que la présente convention soit rédigée en anglais).

.....
(Signature)

.....
(Please print your name)

.....
(Date)



General Information Form

C O N F I D E N T I A L
-- FOR OFFICE USE ONLY --

Family Name_____

First Name_____M____F____

Address_____

City_____Postal Code_____

Telephone: Res._____Work_____

E-mail_____

Date of birth_____Place_____

Marital status_____

Occupation_____

Please list the courses that interest you:

Would you like us to call you to register for a course? Alternately, you can drop by or call the office. (please circle your answer below)

Yes

No

Have you done personal work with a therapist? If yes, what type of therapy have you experienced and when?

What made it easier for you to contact us?

Friend____NHC student____Therapist____Open House____Web Site____

NHC Lecture/Workshops____Newspaper Ads____(which paper?_____)

Referral by an association____Other_____

What were the obstacles in coming in and registering?

Location____Transportation____Family committments____Cost of courses____

Lack of financial support____Lack of mental/emotional support____

Other(define)_____

What do you think Institute NHC can offer you?

The NHC holistic approach to Natural Health____A new career____

Mental/emotional/spiritual support____Professional standards of training____

A specific technique____A community of like minded people____

Other(define)_____

What expectations do you have of yourself in coming to Institute NHC?

Lifestyle change____Developing mental/emotional/spiritual self-awareness____

Understanding the body-mind connection____Personal growth____

To become a professional therapist____

Other(define)_____

PERSONAL MEDICAL FORM

C O N F I D E N T I A L
-- FOR OFFICE USE ONLY --

Name: _____ Date of birth: _____ Tel. (home): _____

Address: _____ Postal Code: _____ Tel. (work): _____

Marital Status: _____ No. of Children: _____

Occupation: _____ Hobbies: _____

1. Do you now, or have ever had, any of the following?

<u>Yes</u>	<u>When</u>	<u>Yes</u>	<u>When</u>
_____	Allergies	_____	Anemia
_____	Arthritis	_____	Back Problems
_____	High Blood Pressure	_____	Low Blood Pressure
_____	Cancer	_____	Chronic Constipation
_____	Chronic Diarrhea	_____	Diabetes
_____	Headaches	_____	Heart Problems
_____	Hepatitis	_____	Insomnia
_____	Kidney Problems	_____	Migraines
_____	Do you use orthotics?	_____	Osteoporosis
_____	Phobias	_____	Are you pregnant? How many months?
_____	Recent injuries	_____	Stomach problems
_____	Surgery	_____	Thyroid
_____	TMJ	_____	Varicose Veins
_____	Contagious diseases? Herpes? _____	_____	AIDS? _____ Other? _____
_____	Neurological diseases? MS? _____	_____	Parkinson's? _____ Other? _____
_____	Skin Problems? Rashes? _____	_____	Eczema? _____ Psoriasis? _____

Other health problems that you would like us to know about?

2. Have you ever had (recently or in the past) a physical or psychological trauma?

_____	Accident	_____	Disappointment
_____	Divorce	_____	Grief/Mourning
_____	Loss of employment	_____	Loss of a friend
_____	Mental Aggression	_____	Monetary loss
_____	Moving	_____	Physical Aggression
_____	Separation	_____	Serious illness

Other? Please specify:

PAYMENT & WITHDRAWAL POLICY 2010-11

Course & Fee Costs

Course Tuition	\$12 per credit hour
Administration Fee*	\$5 per course
Course Registration Fee	\$50 per course
Student Fee*	\$30 per scholastic year
Application Fee (applies only to certificate/diploma students)*	\$50
Audit Fee (one class only)*	\$50
Audit Fee (full course)	50% of cost of course (Available only to students who have passed the course.)
Course Withdrawal Fee for courses under \$1000.00	\$50 per course plus cost of course hours attended (Maximum of three classes)
Course Withdrawal Fee for courses over \$1000.00	\$250 per course plus cost of course hours attended (Maximum of three classes)
Payment Plan Fee*	5% of balance after initial deposit

Payment Plans

- Payment plans must be set up and processed at time of registration.
- Any balance outstanding after registration is subject to a payment plan and a 5% fee will be applied.
- A student is entitled to a maximum of three payments following the initial registration deposit unless total registration costs equal more than \$1200 in which case a student is entitled to a maximum of eight payments following the initial registration deposit.
- Payments must be completed prior to the end of the scholastic year.
- A credit card or post dated cheques are required to set up a payment plan upon registration.

Course Withdrawal

- A fee of \$50 plus cost of course hours attended will be applied to each course in which a student withdraws.
- Students choosing to change registration from one course to another are required to pay the course withdrawal fee.
- *Administration fees, student fees, application fees, audit fees and payment plan fees are non-refundable.
- For courses costing \$1000 or more, a course withdrawal fee of \$250 plus cost of course hours attended is applied.
- There will be no refund after the third class.

Discounts

- Students over the age of 60% receive a 10% discount
- Students registering prior to June 30 of the preceding scholastic year will receive a 10% discount when full payment is made by cash, debit or cheque (7% when full payment is made by credit card)

Workshops

- Workshops are not eligible for payment plans.
- Full payment is required upon registration
- Workshops are not subject to administration fees, student fees, application fees or audit fees
- Refunds for workshops will not be issued within 7 days (5 business days) of workshop commencement, prior to that a full refund will be issued.

Miscellaneous

- Tuition fees are tax deductible. NHC issues tax receipts in February.
- Visa, MasterCard, debit, cash and personal cheque are accepted.
- NHC reserves the right to make changes or cancel any particular course without notice.
- Course costs are subject to change.