Requirements and Expectations

Each student is required to have a high school diploma or a General Education Development (GED) Certificate.

Each student must be in good health and present a neat clean appearance. Each student must maintain professional and respectable behavior. Genesis Dental School of Assisting retains the right to dismiss students whose behavior is disrespectful, disruptive, inappropriate, immoral, illegal, or unethical as deemed by Company. Any student being dismissed will not be allowed to re-register or re-enter the program at any future time.

A graduation certificate, letter of recommendation, and pin will only be awarded to those students attaining a 70% or above grade average, and who have missed no more than 2 classes. Those students whose grade average is below 70% or who have missed more than 2 classes will not receive a certificate but will be allowed to retake the entire course (if desired) at a reduced fee of $1995.

Refunds and Cancellations

A full refund will be made of all deposits or payments if cancellation is made before the closing of registration which is the night of the Open House. (As part of this policy, and as a possible exception to the Open House deadline, is a three-business-day cooling off period, commencing with the day the enrollment agreement is signed or an initial deposit or payment toward tuition is made, until midnight of the third business day following such date or from the date that the student first visits the institution, whichever is later, during which time the contract may be rescinded and all monies paid refunded. Evidence of personal appearance at the institution or deposit of a written statement of withdrawal for delivery by mail or other means shall be deemed as meeting the terms of the cooling-off period).

After the night of the Open House but prior to the second class, all but $500.00 will be refunded if cancellation is made.

For cancellations during Class 2 through 5, $250.00 per session will be charged plus $500.00 for the first class and any remaining balance will be refunded. There will be no refunds after the fifth session.

Those wishing to cancel for illness or personal reasons may resume their course of study in the next class series with no penalty and may repeat the already completed sessions if desired. No refund of any kind will be awarded to students who have been dismissed.

Disclaimers & Disclosures

(A) Genesis Dental School of Assisting is REGISTERED UNDER THE UTAH POSTSECONDARY PROPRIETARY SCHOOL ACT (Title 13, Chapter 34, Utah Code).

(B) Registration under the Utah Postsecondary Proprietary School Act does not mean that the State of Utah supervises, recommends, nor accredits the institution. It is the student's responsibility to determine whether credits, degrees, or certificates from the institution will transfer to other institutions or meet employer's training requirements. This may be done by calling the prospective school or employer.

(C) The institution is not accredited by a regional or national accrediting agency recognized by the United States Department of Education.

(D) No credit, such as reduced tuition or reduced hours, will be granted for any previous experience, education, or training.

(E) Genesis Dental School of Assisting, to the best of its ability, will maintain graduation rates and employment rates for all its graduates; such information is available upon request.

(F) Our program includes training during the program and assistance following the program in helping students achieve secure employment. However, Genesis Dental School of Assisting cannot and does not guarantee job placement or wage levels.

(G) Genesis Dental School of Assisting maintains a surety bond held by the Division of Consumer Protection.

Genesis Dental Assistant School 11531 So. District Main Dr. Suite 600 South Jordan, Utah 84095	801 505-9730 phone 385-324-6414 text school@genesisdental.net

I, the undersigned, have read, understand, and agree to abide by all the provisions set forth in the foregoing enrollment and registration agreement.

Student Signature:_____Date: _____